$\frac{\textbf{STEP 1: MEMBER PETITION FOR ADMINISTRATIVE REVIEW OF STAFF ACTION OR}{\underline{\textbf{DETERMINATION}}}$

TO:	Indiana Public Retirement System (INPRS) Attn: Administrative Review One North Capitol, Suite #001 Indianapolis, IN 46204 AdministrativeReviews@INPRS.in.gov		
FROM	1 :		
	Member Name, if different than submitter:		
	Pension Identification Number:		
	Telephone Number:		
	Email address:		
RE:	Request for Administrative Review of INPRS	Staff Action or Determina	ation
includ includ	nust explain the basis of your dissatisfaction with e sufficient facts on which you base your request e your desired outcome. Attach additional sheets nentation that you have.	for administrative Revie	w. This statement should
 Signat	ure		Date

STEP 2: PETITION FOR REVIEW BY ADMINISTRATIVE LAW JUDGE INSTRUCTIONS

If you are dissatisfied with the initial determination issued in response to your request for administrative review and wish to challenge that action or determination, you may bring the matter before an administrative law judge (ALJ).

To initiate this process, you must file a petition for ALJ review with the INPRS Executive Director within fifteen (15) days after receipt of INPRS' initial determination.

- 1. To file a petition for review, sign and send the form on the next page to the INPRS Executive Director as provided on the next page.
- 2. This petition for review must be received by INPRS or postmarked not more than fifteen (15) days after receipt of INPRS' initial determination as evidenced by US Certified Mail receipt or email. Otherwise, you have waived your right to further review.
- 3. Once the petition is timely received, the ALJ will set the schedule for the administrative process. You will be notified of conference and hearing dates and locations.

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FROM	Λ :	
	Member Name, if different than submitter:	
	Pension Identification Number:	
	Telephone Number:	
	Email address:	
	ought before an administrative law judge for revien ination, the supporting circumstances, and my definition, the supporting circumstances.	

Date

Signature