

PERS or ORP Election Form

This form must be submitted to your campus HR Benefits Office by the 10th of the month in which you are eligible to enroll in a retirement plan. Late submission of this form will result in automatic enrollment in the Public Employees Retirement System (PERS)/Oregon Public Service Retirement Plan (OPSRP).

A. Personal Information				
SSN:	Last Name:	First Name:	me:	
Address:	City:	State:	Zip:	
Contact Phone:	Contact Email:			
Institution:	Hire Date:	Eligibility Dat	e:	
B. Other Employment Inf	ormation			
Prior to your current emplor University or PERS covered	yment, have you ever worked for or are you employer?	currently working for ano	ther Oregon Public	
If yes, complete the followi	ng: Employer Name:	From:	To:	
C. Retirement Plan Election	on – Elect ONE plan. This is a one-time i	rrevocable election.		
submit a PERS-to-ORP I currently have a leand submit a PERS-to- Choose your ORP Fut ORP: Fidelity Investing your must als	PERS Tier 1, 2 or OPSRP account which I do not v -ORP Transfer Form. Ind Sponsor – You must select one of the fu	vant to transfer to the ORP. In the ORP. In the order of the ORP. In the order options at we would not be a second order on the order options at we would not be a second order or order or	f so, you must also complete	
	o set up your TIAA online account and select you ed Guide and paper application call TIAA at 800-		w.tiaa.org/opurp. To request a	
2. □ Public Employees Re	etirement System (PERS)/Oregon Public Ser	vice Retirement Plan (OPS	SRP)	
D. Certification and Signa	ture			
 I am employed by the universe. Contributions sent to an ORP receives my online or signed. The Board and Plan Sponsor, the Board and Plan Sponsor, 	I make between the ORP and PERS Tiers 1 or 2/OPSRI sities participating in the ORP, including future period fund sponsor selected in section C may be invested in application form indicating my investment choice(s). assume no responsibility for determining that investments officers, employees, and agents harmless from, an costs, including reasonable attorneys' fees that may a	s of employment or re-employm n an age-appropriate lifecycle fu nents I select are suitable for me d to pay the State of Oregon pro	nent. Induntil the fund sponsor I agree to indemnify and hold omptly on demand for, any and all	
	on is in addition to and in no way restricts any rig I Oregon Public Universities Retirement Plans.	ghts which may exist in law o	r under any other	
Employee Signature:		Date:		
	*** Please keep a copy of this form fo	or your records***		

PERS or ORP Election Form Instructions

Your election must be submitted by the 10th of the month in which you are eligible. Late submission or failure to submit will result in automatic enrollment in PERS/OPSRP

A. All information in this section is required for us to process your form.

B. This information will assist in verifying your eligibility to make this election.

C. If you elect the ORP, and are a current PERS member, you will be placed into the tier based on your individual situation.

If you elect the ORP, contributions will be sent to the fund sponsor you select. To avoid delays, set up your online investment account as soon as possible.

If you are already a PERS member and wish to remain in PERS, you will be placed into the tier based on your individual situation.

D. This is a one-time irrevocable election. For additional information on the ramifications of your plan selection, visit www.opurp.org or contact your university HR/Benefits representative.

Your signature and date are required to confirm your election.

This form must be submitted to your campus HR Benefits Office by the 10th of the month in which you are eligible to enroll in a petirement plan. Late submission of this form will result in automatic enrollment in the Public Employees Retirement System (PERS)/Oregon Public Service Retirement Plan (OPSRP).

A. Personal Information				
SSN:	Last Name:	First Name: _		
Address:	City:	State:	Zip:	
Contact Phone:	Contact Email	:		
Institution:	Hire Date:	Eligibility Da	Eligibility Date:	
B. Other Employment Info	rmation			
Prior to your current employn	ment, have you ever worked for or are yo	u currently working for an	other Oregon Public	
University or PERS covered er	mployer?			
If yes, complete the following	g: Employer Name:	From:	To:	

C. Retirement Plan Election - Elect ONE plan. This is a one-time irrevocable election.

- 1. Optional Retirement Plan (If you are a current PERS Tier 1, 2 or OPSRP member, check one of the boxes below)
 - ☐ I currently have a PERS Tier 1, 2 or OPSRP account which I do want to transfer to the ORP. If so, you must also complete and submit a PERS-to-ORP Transfer Form.
 - ☐ I currently have a PERS Tier 1, 2 or OPSRP account which I **do not** want to transfer to the ORP. If so, you must also complete and submit a PERS-to-ORP Transfer Form.

Choose your ORP Fund Sponsor - You must select one of the fund sponsors below.

☐ ORP: Fidelity Investments

You must also set up your Fidelity online account and select your investment options at www.netbenefits.com/opurp.

To request a Getting Started Guide and paper application call Fidelity at 800-343-0860.

☐ ORP: TIAA

You must also set up your TIAA online account and select your investment options at www.tiaa.org/opurp. To request a Getting Started Guide and paper application call TIAA at 800-842-2252.

2. ☐ Public Employees Retirement System (PERS)/Oregon Public Service Retirement Plan (OPSRP)

D. Certification and Signature

- 1. I understand that the choice I make between the ORP and PERS Tiers 1 or 2/OPSRP is a one-time, irrevocable choice that will be effective as long as I am employed by the universities participating in the ORP, including future periods of employment or re-employment.
- Contributions sent to an ORP fund sponsor selected in section C may be invested in an age-appropriate lifecycle fund until the fund sponsor receives my online or signed application form indicating my investment choice(s).
- 3. The Board and Plan Sponsor assume no responsibility for determining that investments I select are suitable for me. I agree to indemnify and hold the Board and Plan Sponsor, its officers, employees, and agents harmless from, and to pay the State of Oregon promptly on demand for, any and all losses, liabilities, claims, and costs, including reasonable attorneys' fees that may arise from my acts or omissions related to my selection of investments or services.

This release and indemnification is in addition to and in no way restricts any rights which may exist in law or under any other agreement(s) between me and Oregon Public Universities Retirement Plans.

Employee Signature: Date:

*** Please keep a copy of this form for your records***

Institution	Drop-Off Location	Mailing Address	City, State, Zip	Fax
EOU	Inlow Hall, Room 209	One University Blvd	La Grande, OR 97850	541-962-3023
OIT	Snell Hall, Room 111	3201 Campus Dr	Klamath Falls, OR 97601	541-851-5200
OSU	236 Kerr Admin Bldg	236 Kerr Admin, MS: HR	Corvallis, OR 97331	541-737-0541
PSU	1600 SW 4 th Ave, Ste 518	PO Box 751	Portland, OR 97207-0751	503-725-5896
SOU	Churchill 159	1250 Siskiyou Blvd	Ashland, OR 97520	541-552-8508
UO	677 E. 12 th Ave, Suite 400	5210 University or Oregon	Eugene, OR 97403	541-346-2548
WOU	Admin 306	345 N Monmouth Ave	Monmouth, OR 97361	503-838-8522