

ORP or PERS Election Instructions

A) Fill in your personal information:

Identification:	SSN:	<input type="text"/>	Date of:	Birth:	<input type="text"/>
	First Name:	<input type="text"/>		Hire:	<input type="text"/>
	Last Name:	<input type="text"/>		Eligibility:	<input type="text"/>
Contact:	Address:				
	City:	<input type="text"/>	State	<input type="text"/>	Zip Code
	Phone/Email	<input type="text"/>			
	Institution:	<input type="text"/>			

B) Elect ONE Plan: This is a one-time, irrevocable election

Optional Retirement Plan (ORP)

I currently have an OPSRP/PERS account. (If so, you must also complete and attach a [PERS-to-ORP Transfer Form](#).)

Next Steps: Go to Section C to select your ORP Fund Sponsor, and then complete Section D to certify your election.

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

Next steps: Complete Section D to certify your election.

C) ORP Fund Sponsor: If you have selected ORP, choose ONE sponsor

ORP: Fidelity Investments

You must apply online or send your ORP application directly to Fidelity Investments to ensure your contributions are invested as you wish. Request a Getting Started Guide to download the guide and apply online at www.netbenefits.com/opurp

ORP: TIAA

You must send your TIAA application for directly to TIAA to ensure your contributions are invested as you wish. Apply online at www.tiaa.org/opurp

D) Certification and Signature

I understand that the choice I make between the ORP and OPSRP/PERS 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.

I further understand that:

- Contributions sent to an ORP fund sponsor selected above may be invested in an age-appropriate lifecycle fund (Fidelity) until the fund sponsor receives my online or signed application form indicating my investment choice(s);
- 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, an 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 form must be returned to my campus benefits office by the 10th of the month in which I am eligible to enroll in the retirement plans. Late return of this form will result in automatic PERS/OPSRP enrollment.**

This release and indemnification is in addition to and in no way restricts any rights which may exist at 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*****

Human Resources Use Only: Date Received: _____

Processed by: _____

Processing Date: _____

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A) Fill in your personal information to assist us in processing your form. This information also allows us to contact you if we require any additional information. All information in this section is required for us to complete your election.

B) Select the plan in which you would like to participate. If you select the ORP, you must also complete section C. Be sure to enroll with your ORP sponsor as soon as possible to avoid any delay in investing your ORP contributions.

C) Your ORP contributions will be sent to the ORP Fund Sponsor that you select in this section. For more details about each fund sponsor, visit their OUS-specific website or contact your local HR representative.

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First Name:

Last Name:

Address:

City: State Zip Code

Phone/Email:

Institution:

Date of: Birth:

Hire:

Eligibility:

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D) These are some of the important ramifications of your plan selection. For more details about this choice please visit www.opurp.org or contact your local HR representative. Your signature and current date is required at the bottom of section D.

D3) To record your election, return this form to your campus benefits office as outlined below. If your form is not returned, you will be automatically enrolled in PERS/OPSRP.

Institution	Drop-Off Location	Mailing Address	City, State, Zip	FAX
EOU	Inlow Hall, RM 105	One University Blvd	La Grande, OR 97850	541-962-3023
OIT	Snell Hall 107	3201 Campus Dr	Klamath Falls, OR 97601	541-851-5200
OSU	236 Kerr Admin Bldg	236 Kerr Admin Bldg	Corvallis, OR 97331-2132	541-737-7771
PSU	1600 SW 4 th Ave, Ste 518	P.O Box 751	Portland, OR 97207-0751	503-725-5896
SOU	Churchill 139	150 Siskiyou Blvd	Ashland, OR 97520	541-552-8508
UO	677 E 12 th St. Ste 400	5210 University of Oregon	Eugene, OR 97403	541-346-2548
WOU	Admin. 205C	345 N Monmouth Ave	Monmouth, OR 97361	503-838-8144