

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: | <input type="text"/> | | | |
| | 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 submit 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 also enroll online at www.netbenefits.com/opurp to select how your contributions are invested. You may also request a Getting Started Guide and paper application by calling fidelity Investments at 800-343-0860.

 ORP: TIAA

You must also online at www.tiaa.org/opurp to select how your contributions are invested. You may also request a Getting Started Guide and paper application by calling TIAA at 800-842-2252.

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 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, 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 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 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*****

Human Resources Use Only: Date Received: _____

Processed by: _____

Processing Date: _____

ORP or PERS Election Instructions

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 OPURP-specific website or contact your local HR representative.

ORP or PERS Election Instructions

www.opurp.org

Clear Form

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: <input type="text"/> | | |
| | City: <input type="text"/> | State: <input type="text"/> | Zip Code: <input type="text"/> |
| | 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 submit 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

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ORP: TIAA
 You must also enroll online at www.tiaa.org/opurp to select how your contributions are invested. You may also request a Getting Started Guide and paper application by calling TIAA at 800-842-2252.

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I further understand that:

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- 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 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 in law or under any other agreement(s) between me and Oregon Public Universities Retirement Plans.

Employee Signature Date

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Human Resources Use Only: Date Received: _____ Processed by: _____ Processing Date: _____

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 209 | One University Blvd | La Grande, OR 97850 | 541-962-3023 |
| OIT | Snell Hall 110 | 3201 Campus Dr | Klamath Falls, OR 97601 | 541-851-5200 |
| OSU | 236 Kerr Admin Bldg | 236 Kerr Admin Bldg | Corvallis, OR 97331 | 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. 305 | 345 N Monmouth Ave | Monmouth, OR 97361 | 503-838-8522 |