



University of Rochester
403(b) Retirement Program

RETIREMENT SERVICE CREDIT FORM

After two years of employment as a full-time or part-time faculty or staff member, the University will begin making a Direct Contribution to the Retirement Program on your behalf. This includes prior service completed at:

- Higher educational institution
Teaching hospital
Research foundation, not-for-profit
Support organization for higher educational institutions, not-for-profit
Member of the controlled group* of the University

Please note: Student employment is not considered regular employment and is not eligible for service credit.

Name _____ Date of Hire _____ Employee I.D. # _____

I hereby certify that I was previously employed by the following higher educational institution(s), teaching hospital(s), not-for-profit research foundation(s), not-for-profit support organization(s) for higher educational institutions, or member of the University's controlled group* as a regular employee, and that my work schedule at each employer was at least 50% of a regular full-time schedule:

Table with 4 columns: Name of Employer, City & State, Dates of Service (From), Dates of Service (To). Includes three rows for data entry.

Signature of Employee Telephone Number Date

To receive service credit, please complete and return this form to the University of Rochester Benefits Office:

E-mail: retirementprogram@ur.rochester.edu Fax: 585-273-1054 Mail: P.O. Box 270453

If you have questions, please contact 585-275-4668.

Forms received more than 90 days after appointment date cannot be processed retroactively.

* Members of the controlled group of the University of Rochester include: Highland Hospital, Highlands at Brighton, Highlands at Pittsford, Highlands Living Center, Visiting Nurse Service (UR Medicine Home Care), Visiting Nurse Signature Care, High Tech Rochester, Nicholas H. Noyes Memorial Hospital, Jones Memorial Hospital, and F. F. Thompson Health System, Inc.