



University of Rochester 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, F. F. Thompson Health System, Inc., 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 3 columns: Name of Employer, City, State, and Dates of Service (From/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: PO Box 270453 or Fax 585-273-1054

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

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

Forms submitted without prior service listed will be discarded.

\* 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.