



**New York State Employees' Retirement System Membership**  
For College Work Study Employees

As a part-time New York State employee you may enroll in the New York State Employees' Retirement System (ERS). Enrollment in ERS is optional for you, and if you join you may not withdrawal membership as long as you remain on the payroll of an employer who participates.

Membership requires the enrollee to contribute 3% of their salary towards the retirement system through payroll deduction. Enrollees must satisfy the equivalent of five-years of full-time service to meet the vesting requirement. As a part-time employee you will accrue less than a year's service credit for each year of employment.

More information is available at <http://www.osc.state.ny.us/retire/publications/vo1522.htm>.

Please indicate below if you currently hold a membership in the NYS Employees' Retirement System, or whether you wish to join or decline membership at this time.

\_\_\_ I am not a member of the NYS Employees' Retirement System and I DO NOT WISH TO JOIN AT THIS TIME.

\_\_\_ I am interested in learning more about enrolling in ERS. I understand that if I would like more information or to enroll in ERS, I need to contact the Benefits Office in HAB 203 at x3169, and that failure to enroll within 30 days of signing this statement will indicate a default to decline enrolling in NYS Employees' Retirement System at this time.

\_\_\_ I am presently a member of the NYS Employees' Retirement System  
Membership #: \_\_\_\_\_ Date of Membership: \_\_\_\_\_

*Failure to make a selection above to enroll or decline enrollment within 30 days of signing this statement will indicate an automatic default to decline enrolling in ERS at this time.*

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Last 4 digits of SS#)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**\*\*\*This form is part of your employment paperwork. It must be completed and submitted with all other employment forms in order for your appointment to be processed\*\*\***