

HR Services & Transitions Center (HRSTC)

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New York State (Contract College) Retirement Plan

Election/Waiver Form
Must be returned within 30 days of your eligibility/hire date.

PART A: CONTRACT COLLEGE RETIREMENT ELIGIBILITY (To be read by all contract college employees).

	Appointment Type	Time Type	NYS Retirement Plan	Plan Participation
	Regular	Full Time	Employees' Retirement System (ERS)	Mandatory
	Regular	Part Time (29 hours or less)	Employees' Retirement System (ERS)	Not Mandatory
	Temporary OR Fixed Term (minimum of 13 months)	Full or Part Time	Employees' Retirement System (ERS)	Not Mandatory
Non-Exempt (Hourly)	Regular	Full Time	State University of New York Optional Retirement Program (SUNY ORP)	Hourly employees only have the option of SUNY ORP if they were a vested previous SUNY ORP participant and maintained account balance.
	Temporary OR Fixed Term (minimum of 13 months) If the total period of the initial appointment and any extensions results in a combined period of 18 months or greater, participation becomes mandatory.	Full Time or Part Time	Employees' Retirement System (ERS) OR State University of New York Optional Retirement Program (SUNY ORP)	Hourly employees only have the option of SUNY ORP if they were a vested previous SUNY ORP participant and maintained account balance.
Exempt (Salaried)	Regular	Full Time	Employees' Retirement System (ERS) OR State University of New York Optional Retirement Program (SUNY ORP)	Mandatory – once employee selects their NYS Retirement Plan option, that selection is irrevocable.
	Regular	Part Time (29 hours or less)	Employees' Retirement System (ERS) OR State University of New York Optional Retirement Program (SUNY ORP)	Not Mandatory Can enroll in SUNY ORP if Benefits Eligible or previous SUNY ORP participant and maintained account balance
	Temporary OR Fixed Term (minimum of 13 months) If the total period of the initial appointment and any extensions results in a combined period of 18 months or greater, participation becomes mandatory.	Full or Part Time	Employees' Retirement System (ERS) OR State University of New York Optional Retirement Program (SUNY ORP)	Not Mandatory Can enroll in SUNY ORP if Benefits Eligible or previous SUNY ORP participant and maintained account balance

Diversity and Inclusion are a part of Cornell University's heritage. We are a recognized employer and educator valuing AA/EEO, Protected Veterans, and Individuals with Disabilities. We also recognize a lawful preference in employment practices for Native Americans living on or near Indian reservations.

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PART B: EMPLOYEE INFORMATION (Please print plainly or type).

Last Name	First Name	Title			
Date of Birth	Cornell Employee ID #	E-Mail Address			
Home Address					
City	State	Zip Code			
	T: In accordance with the Federal Privacy Act of 1974, you are pursuant to Sections 11, 34, 311, and 334 of the Retirement tration of the Retirement System.				
I understand the retirement progr by Cornell University, a contract co () Employees' Retirement System	RETIREMENT ELECTION (To be completed am(s) available to me or required pursuant to ollege of the State University of New York, I hen (ERS) – enrollment in ERS requires the completegistration: https://hr.cornell.edu/sites/defau	law in connection with my employment ereby elect to participate in the: letion of form RS 5420 Employees'			
01/RS5420%20ERS%20Enrollment		<u>Iq IIIC3/ 2023</u>			
() I choose to waive my right to participation becomes mandatory Retirement System (ERS) with New have the option of enrolling in ERS ORP within 30 days of the date of	participate in a contract college retirement plan at a later date, an hourly employee, I will be I w York State and Local Retirement Systems (NY 5 or SUNY ORP. I understand that I will need to mandatory participation in a NYS retirement p , I understand I will be automatically enrolled	limited to enrollment in the Employees' (SLRS), OR as a salaried employee, I will be submit my election to enroll in SUNY plan. If I do not submit my election to			
•	York Optional Retirement Program (SUNY abership to SUNY ORP to determine tier and vesti				
	you presently own a SUNY ORP or Corebridge Financials, Fidelity Investments, TIAA, or Voya employer-sponsored, aployer-funded retirement plan account (account must contain vested employer contributions)? () Yes () No				
If yes, who is the investment vend	or and what is the contract number?				
From what institution(s) were the	se contracts established?				
Retirement System? () Yes ()	e New York State Employees' Retirement Syste No If yes, call HRSTC at (607) 255-3936 for efit from any public retirement system in New	r more information.			

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PART E: WAIVER (To be read by <u>all</u> contract college employees electing to waive membership in a NYS retirement plan).

I hereby waive my right and privilege to participate as a member in the Employees' Retirement System (ERS) with New York State and Local Retirement System (NYSLRS) or the State University of New York Optional Retirement Program (SUNY ORP). In exercising this waiver, I understand that: As a part-time, temporary, provisional, or seasonal employee on the payroll of the contract colleges at Cornell University, I am eligible to apply for membership to the ERS. Or, as an exempt employee with a part-time, temporary, provisional, or seasonal appointment on the payroll of the contract colleges at Cornell University, I am eligible to apply for membership to SUNY ORP. As long as I remain part-time, temporary, provisional, or seasonal, and waive enrollment, I will not be subject to the employee retirement contribution obligation.

In addition, I shall not be given retirement credit under the ERS nor will employer contributions be made to SUNY ORP. I understand that my employment will be subject to Social Security taxes (FICA) and, as a result, I will receive Social Security credit relating to this employment. I understand that if retirement plan participation becomes mandatory at a later date, I will have 30 days from such date to make my retirement plan election. Further, if I am eligible for SUNY ORP and do not make the election to enroll in SUNY ORP within the 30 day period, I understand I will be automatically enrolled in the ERS defined pension plan, In exercising this waiver, I hereby expressly release and relieve Cornell University from all liability or responsibility for providing retirement or beneficiary benefits for me or any other person in respect of my earnings to which I have hereby waived my rights, unless and until it becomes mandatory for me to enroll in a NYS retirement plan.

PART F: ACKNOWLEDGEMENT (To be completed by <u>all</u> contract college employees).

Per my signature below, I understand that my NYS retirement (pension) plan election (i.e. SUNY ORP) is irrevocable and will
continue for all SUNY and Community College employment, unless I become, "newly eligible" to participant in an alternative
NYS retirement (pension) system.

Employee Signature:	Date:
Employee Signature:	 Date: