

## New York State (Contract College) Retirement Plan for Regular Faculty and Staff Election Form

**Must be returned within 30 days of your eligibility/hire date.**

***A regular staff member is an employee who is scheduled to work 30 hours a week or more and their position does not have an end date.***

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

	Appointment Type	Time Type	NYS Retirement Plan	Plan Participation
<b>Non-Exempt (Hourly)</b>	Regular	Scheduled to Work 30 Hours per Week	Employees' Retirement System (ERS)	Mandatory
	Regular	Scheduled to Work 30 Hours per Week	Already a participant in the State University of New York Optional Retirement Program (SUNY ORP)	Mandatory: Please notify HR Services and Transitions Center as soon as possible if you are a SUNY ORP participant from previous Cornell employment OR through employment elsewhere
<b>Exempt (Salaried)</b>	Regular	Scheduled to Work 30 Hours per Week	Employees' Retirement System (ERS) <b>OR</b> State University of New York Optional Retirement Program (SUNY ORP)	Mandatory – once employee selects their NYS Retirement Plan option, that selection is irrevocable.

### **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

**SOCIAL SECURITY DISCLOSURE REQUIREMENT:** In accordance with the Federal Privacy Act of 1974, you are hereby advised that disclosure of the Social Security Account Number (via Workday) is mandatory pursuant to Sections 11, 34, 311, and 334 of the Retirement and Social Security Law. The number will be used in identifying retirement records and in administration of the Retirement System.

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**PART C: CONTRACT COLLEGE RETIREMENT ELECTION** *(To be completed by all contract college employees – please note that you cannot be receiving distributions or pension payments from a NYS public retirement plan, including ERS, TRS, and SUNY ORP and also receive contributions from a NYS public retirement plan).*

I understand the retirement program(s) available to me are required pursuant to law in connection with my employment by Cornell University, a Contract College of the State University of New York, I hereby elect to participate in the following NYS retirement plan.

( ) Employees' Retirement System (ERS) – enrollment in ERS requires the completion of form RS 5420 Employees' Retirement System Membership Registration: [https://hr.cornell.edu/sites/default/files/2023-01/RS5420%20ERS%20Enrollment\\_updated%20Jan%202023.pdf](https://hr.cornell.edu/sites/default/files/2023-01/RS5420%20ERS%20Enrollment_updated%20Jan%202023.pdf)

( ) State University of New York Optional Retirement Program (SUNY ORP)

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**PART D: State University of New York Optional Retirement Program (SUNY ORP)** *(To be completed by all contract college employees applying for membership to SUNY ORP to determine tier and vesting date).*

Do you presently own a SUNY ORP or Corebridge Financials, Fidelity Investments, TIAA, or Voya employer-sponsored, employer-funded retirement plan account (account **must** contain vested **employer** contributions)? ( ) Yes ( ) No

If yes, who is the investment vendor and what is the contract number? \_\_\_\_\_

From what institution(s) were these contracts established? \_\_\_\_\_

Are you presently a member of the New York State Employees' Retirement System or the New York State Teachers' Retirement System? ( ) Yes ( ) No If yes, call HRSTC at (607) 255-3936 for more information.

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**PART F: ACKNOWLEDGEMENT** *(To be completed by all contract college employees – both questions **MUST** be answered).*

*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.*

Are you presently receiving a benefit from any public retirement system in New York State (for example, ERS, TRS, or SUNY ORP)? ( ) Yes ( ) No

If yes, which system? \_\_\_\_\_

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Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_