



Notice of Exclusion from CalPERS Membership

Public Agency and Schools

Your employer has contracted with the California Public Employees' Retirement System (CalPERS) to provide an employee benefit which includes service retirement, death, and disability benefits.

Section	1: Employee Info	rmation				
Last Name	Fir	st	Middle	DOB	CID	
Section	2: Employer Info	rmation				
Name of Department		Division		Position Title		
Term of App	pointment: \Box Permane	ent ☐ Temporary				
If Temporary	, enter nearest number of wh	nole months the appointment is exp	pected to last: Months	:	Appointment Date	
Time Base:	☐ Full Time	☐ Intermittent				
	☐ Indeterminate	☐ Part Time if part time en	ter the fraction of full time:			
In your cu	rrent position with this	agency, you are excluded f	rom CalPERS membe	rship because	:	
1.	Your full time seasonal or limited term appointment is limited to six months or less.					
2.	Your part time appointment is limited to less than an average of 20 hours per week for less than one year.					
3.	Your appointment is an on call, intermittent, emergency, substitute, or other irregular basis which excludes					
	you from membership until you have worked 1,000 hours (or 125 days if paid on per diem basis) in a fiscal					

5. You are an independent contractor.

year (July 1-June 30).

4.

- 6. You are employed to render professional legal service to a city. Exceptions include persons holding the office of city attorney, deputy city attorney, or assistant city attorney.
- 7. You are employed as a student assistant by a school district in a position established for students only while attending school in the same district. (This only applies to County Schools.)
- 8. You are a CalPERS retiree and have not reinstated from retirement.

Your position is excluded by law. Explain the exclusion that applies below:

Note: If you are a CalPERS member from previous employment and have not terminated membership (taken a refund of your contributions and service credit) exclusions 1, 2, and 3 do not apply to you. You should qualify for membership immediately in your current position. Please notify your employer to complete your enrollment and report your employment to CalPERS.

If you believe your employment does qualify you for CalPERS membership, ask your employer to provide you with an explanation. You can also contact CalPERS directly by sending a letter that provides the reasons why you feel you should be a member to the Employer Account Management Division, P.O. Box 942709, Sacramento, CA 94229-2709

Signature of Certifying Officer	Title	Date	
Signature of Employee		Date	

Note: Information regarding the benefits provided by CalPERS is available on the CalPERS website www.calpers.ca.gov.

The employer must retain this form in the employee's file for auditing purposes.

CalPERS Privacy Notice

Privacy Notice

The privacy of personal information is of the utmost importance to CalPERS. The following information is provided to you in compliance with the Information Practices Act of 1977 and the Federal Privacy Act of 1974.

Information Purpose

The information requested is collected pursuant to the Government Code (sections 20000 et seq.) and will be used to conduct CalPERS Board of Administration duties under the Public Employees' Retirement Law, the Social Security Act, and/or the Public Employees' Medical and Hospital Care Act, as the case may be. Submission of the requested information is mandatory. Failure to submit the required information may result in CalPERS being unable to perform its functions regarding your status.

Please do not include information that is not requested.

Social Security Numbers

Social Security numbers are collected either on a mandatory or voluntary basis. If this is CalPERS' first request for disclosure of your Social Security number, then disclosure is mandatory. If your Social Security number has already been provided, disclosure is voluntary. Due to the use of Social Security numbers by other agencies for identification purposes, we may be unable to verify eligibility for benefits without the number.

- 1. Social Security numbers are used for the following purposes:
- 2. Enrollee identification
- 3. Payroll deduction/state contributions
- 4. Billing of contracting agencies for employee/employer contributions
- 5. Reports to CalPERS and other state agencies
- 6. Coordination of benefits among carriers
- 7. Resolving member appeals, complaints, or grievances with health plan carriers

Information Disclosure

Portions of this information may be transferred to other state agencies (such as your employer), physicians, and insurance carriers, but only in strict accordance with current statutes regarding confidentiality.

Your Rights

You have the right to review your membership files maintained by CalPERS. For questions about this notice, our Privacy Policy, or your rights, write to:

CalPERS

CalPERS Privacy Officer 400 Q Street Sacramento, CA 95811

You may also call us at 888 CalPERS (or 888-225-7377).