



Department of Management & Budget
 Office of Retirement Services
 www.michigan.gov/ors (800) 381-5111
 P.O. Box 30171
 Lansing MI 48909-7671

University Service Credit Application

For State Employees Purchasing Service Credit

MEMBER'S NAME (LAST, FIRST, M.I.)	DATE OF BIRTH:	MEMBER ID OR SSN
MAILING ADDRESS	ANTICIPATED RETIREMENT DATE:	DAYTIME TELEPHONE: ()
CITY, STATE, ZIP CODE	PREVIOUS NAME(S) USED:	

Section I – Applicant Authorization

I authorize my former employer and its custodian of retirement records to release information in Section II and III to ORS.

Applicant's Signature: _____ Date: _____

Section II – Employment Certification

To be completed by the employer or employer's custodian of records and forwarded to the employer's retirement system to complete Section III on the back side of this form.

Name of University: _____ Applicant's Last Job Title: _____

YEARS EMPLOYED AT UNIVERSITY		FULL-TIME OR PART-TIME		IF P/T LIST HRS/DAY OR DAYS/MONTH	ANNUAL SALARY EARNED
Year (e.g. 1981)	Dates (e.g. 1/1/81 – 12/31/81)	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T		
_____	_____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	_____	_____
_____	_____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	_____	_____
_____	_____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	_____	_____
_____	_____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	_____	_____
_____	_____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	_____	_____
_____	_____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	_____	_____

By my signature below, I certify that the information I have provided is true and complete to the best of my knowledge.

 Certifying Official's Signature Title Date

 Certifying Official's Name (Print) Address Phone Number

Continue on the back. ➔



*University Service Credit Application
(continued)*

Section III – Retirement Clearance To be completed by the official custodian of retirement records.

Use the below definitions when answering questions.

- **Refunded.** Applicant has been paid any or all retirement contributions on deposit.
- **Distributed.** All retirement benefits have been dispersed.
- **Forfeited.** Applicant has relinquished any or all rights to a retirement benefit either in the past, present, or future.
- **On deposit.** Applicant has funds left on account with your retirement system.
- **Not entitled to refund.** Applicant has funds left on account with your retirement system, but due to membership requirements is not eligible to receive a refund of those contributions.

Applicant's Name: _____			
1. Did the applicant participate in a retirement plan? <input type="checkbox"/> YES (complete entire section) <input type="checkbox"/> NO (sign and return to ORS)			
2. If the plan was a defined benefit plan, when was the applicant a participant? FROM ___/___/___ TO ___/___/___			
3. If the plan was a defined contribution plan, when was the applicant a participant? FROM ___/___/___ TO ___/___/___			
4. If the applicant participated in a defined benefit and defined contribution plan, was the defined benefit plan converted to a defined contribution plan? <input type="checkbox"/> YES <input type="checkbox"/> NO			
5. Is the applicant currently eligible for a benefit? <input type="checkbox"/> YES <input type="checkbox"/> NO			
6. Is the applicant eligible for benefits in the future? <input type="checkbox"/> YES <input type="checkbox"/> NO			
7. Was the applicant eligible for benefits in the past? <input type="checkbox"/> YES (check all that apply) <input type="checkbox"/> NO			
<input type="checkbox"/> REFUNDED <input type="checkbox"/> DISTRIBUTED <input type="checkbox"/> FORFEITED <input type="checkbox"/> ON DEPOSIT <input type="checkbox"/> NOT ENTITLED TO REFUND			
COMMENTS: _____			
8. Were employer contributions made to applicant's account? <input type="checkbox"/> YES (check all that apply) <input type="checkbox"/> NO			
<input type="checkbox"/> REFUNDED <input type="checkbox"/> DISTRIBUTED <input type="checkbox"/> FORFEITED <input type="checkbox"/> ON DEPOSIT <input type="checkbox"/> NOT ENTITLED TO REFUND			
COMMENTS: _____			
<i>By my signature below, I certify that the information I have provided is true and complete to the best of my knowledge.</i>			
_____	_____	_____	_____
Certifying Official's Signature	Title	Date	Phone Number
_____	_____	_____	_____
Certifying Official's Name (Print)	Certifying Agency	Address	

Upon certifying this form, the certifying agency should return this form to:

Office of Retirement Services (ORS), P.O. Box 30171, Lansing MI 48909-7671



University Service Credit

Purchase Requirements

Eligibility

As an active member of the State Employees' Retirement System, you may be credited with service performed with Grand Valley State University, Michigan State University, Oakland University, Saginaw Valley State University, University of Michigan, or Wayne State University. The service may be granted or purchased, depending on the dates of your employment with the university.

Conditions

- You may use university service to satisfy the vesting requirements.
- Your former employer(s) must certify your service.
- If at any point in time you accumulated enough service credit to qualify for a pension based on this service, you cannot purchase the service unless you have relinquished all rights to the pension benefit. Distributions, transfers, or refunds are not considered a relinquishment.
- If you are eligible to receive a benefit with TIAA-CREF based on this service you cannot purchase the service.
- No partial credit can be granted. Any purchase or transfer must be for all of your prior eligible university service, or none can be credited.
- Because only one year of service credit can be earned in any calendar year, you cannot receive credit for any university service you earned while also working full-time for the state of Michigan.

- If you are retiring or leaving state employment, payment must be made in full before terminating.

Cost

If you began working for one of the above universities *after July 1, 1974*, there is no charge for the service credit.

If you worked for one of the universities *before July 1, 1974*, you may receive credit for your service by paying the contributions you would have made to the retirement system if you had been a State Employees' Retirement System member, plus interest. The contributions are based on the wages you earned while employed by the university.

Application Process

1. Upon completing Section I, forward this form to the employing university (see University Addresses below). Section II must be completed by the employer or employer's custodian of records. Section III must be completed by the official custodian of retirement records.
2. ORS will review your application and, if you are eligible, send you a *Member Billing Statement* along with information on payment options. This statement lists the amount of service you are eligible to purchase, the cost, and the due date. Although it is called a billing statement, you're not obligated to buy this credit.
3. To complete the purchase, follow the instructions on the billing statement.

University Addresses

Grand Valley State University
Human Resource Office
140 Lake Michigan Hall
Allendale, MI 49401

Oakland University
Benefits Office
142 N. Foundation Hall
Rochester, MI 48309

University of Michigan
Payroll Office
Room G395 Wolverine Tower
3003 S. State Street
Ann Arbor, MI 48109-1279

Michigan State University
Staff Benefits Office
1407 S. Harrison Rd., Suite 140A
East Lansing, MI 48824-5287

Saginaw Valley State University
Benefits Coordinator
7400 Bay Rd.
University Center, MI 48710

Wayne State University
Personnel Processing and Records
5700 Cass Ave., Suite 3638
Detroit, MI 48202