



MICHIGAN OFFICE OF RETIREMENT SERVICES

Big Plans. Small Steps.

P.O. Box 30171 · Lansing, MI 48909-7671

Toll Free: 800-381-5111

Local: 517-284-4400

Fax: 517-284-4416

www.michigan.gov/ors

Part-Time Community College Student Employment Verification Request

For part-time community college students whose first day worked was **before July 1, 2014**.

If you worked at a community college before July 1, 2014, while attending as a part-time student, you may be eligible for participation in the Michigan Public School Employees' Retirement System. If you're already in a Michigan public school retirement plan, you may have an opportunity to add that community college employment to your retirement account if it hasn't already been reported.

If this describes you and you want the Michigan Office of Retirement Services (ORS) to verify your eligibility, complete this form and send it to ORS.

NOTE: Any section of this form with an asterisk (*) is a required section. Incomplete or partially completed forms received by ORS will cause a delay in the verification process.

*Section I – Personal Information

NAME (LAST, FIRST, M.I.)		NAME USED WHILE ATTENDING COMMUNITY COLLEGE (LAST, FIRST, M.I.)
MAILING ADDRESS		CITY, STATE, ZIP CODE
SOCIAL SECURITY NUMBER	PHONE NUMBER	EMAIL ADDRESS

Section II – Community College Information

NAME OF COMMUNITY COLLEGE(S) WHERE YOU WORKED	FIRST DATE OF EMPLOYMENT (IF KNOWN)
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Section III – Estimated Dates of Employment If you worked at a community college **before July 1, 2014**, while attending as a part-time student, please provide an estimated time frame of when you worked while attending class. (Attach additional sheet of paper if you need to add more community colleges or dates of employment.)

NOTE: DO NOT include any time you worked as a full-time student. Only include the time when you were employed directly by the community college and were a part-time student at that community college during the same time frame.

List below the dates you worked as a part-time student while attending a community college

DATE 1: (MM/DD/YYYY) ____/____/____ TO ____/____/____	COMMUNITY COLLEGE NAME:
DATE 2: (MM/DD/YYYY) ____/____/____ TO ____/____/____	COMMUNITY COLLEGE NAME:

Section IV – Required Documents Provide a copy of the following documents from the community college where you worked to help verify your employment. ORS will not return originals. These documents are required. Check all boxes below that apply.

<input type="checkbox"/>	Proof of part-time student status at community college
<input type="checkbox"/>	Community college transcript (Required)
Proof of community college employment (At least one of the following is required):	
<input type="checkbox"/>	W-2 from the community college
<input type="checkbox"/>	Paystub(s) issued by the community college
<input type="checkbox"/>	Letter of employment from the community college

**Mail your completed form, transcript, and proof of employment to the address below by
January 31, 2020, 5 p.m. EST:**

Michigan Office of Retirement Services, P.O. Box 30171, Lansing, MI 48909-7671
Or fax your form and documentation to 517-284-4416