## PERU CENTRAL SCHOOL DISTRICT NEW YORK STATE TEACHERS' RETIREMENT SYSTEM OPTION FORM (PART-TIME AND SUBSTITUTE TEACHERS & TEACHING ASSISTANTS)

I hereby acknowledge that I have been informed by the Peru Central School District, my employer, that as a "teacher" or "teaching assistant" who is or will be rendering less than full-time service for the District, I may, as a matter of right, join the New York State Teachers' Retirement System. I further acknowledge that I understand under present law that if I elect to join the New York State Teachers' Retirement System, that I must complete a Retirement System Membership Application, which must be filed with the Retirement System in order to be effective. As a result of joining the Retirement System, I will be required to contribute, pursuant to Article 15 of the Retirement and Social Security Law as modified by Chapter 504 of the Laws of 2009, 3.5% of my salary to the Retirement System.

If I join the System, my beneficiary will be protected by a death benefit should I die in service after I have been credited by the system with one year of service. Upon meeting eligibility requirements, I will be entitled to a lifetime pension at age 62 with 10 years of service or a disability pension at an earlier age if I become permanently and totally disabled from gainful employment.

I also understand that if I do not elect to join, I may be unable to obtain credit at a later date for service rendered during the period I was not a member.

	check your preference below and returned with the following election:	n this form to the District Office	so that your initial paycheck can be
	I wish to join the New York State Teachers' Retirement System (an application will be sent to you as soon as this form is received at the District Office).		
	I do not wish to join the New York State Teachers' Retirement System at this time (please return this form to the District Office even if you do not wish to join).		
	I am presently a member of the New York State Teachers' Retirement System. My retirement number as follows:		
	Membership Number:		_
	Date of Joining Membership:		-
	I have recently applied for membership through the School District on (date) and have not yet received a membership number.  I am a retiree of the New York State Teachers' Retirement System. My retirement number is as follows:		
	Retirement Number:		-
	Date of Retirement:		-
(Employee Print Name)		Date	
(Employ	yee Sign Name)		