



San Joaquin County Employees' Retirement Association

RECIPROCAL SELF-CERTIFICATION FORM

Complete and return this form to your Personnel Office within 5 business days

EMPLOYEE NAME _____
(Last) (First) (Middle)

EMPLOYEE ID: _____ EMAIL ADDRESS: _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____

Most Recent Employer: _____ Retirement System: _____
(Refer to list of reciprocal systems on page 2)

Last Date of Employment under most recent reciprocal retirement system: _____
First Membership Date in any previous reciprocal retirement system: _____

Name(s) of any other previous reciprocal retirement system(s) in which you are still a member:

(Check the applicable statement)

_____ I have not been an active member of another reciprocal retirement system within the last six months. Active members are generally, permanent full-time employees. (SJCERA Tier 2)

_____ I was a member and am retired from the _____ Retirement System and subsequently began full-time employment with an SJCERA-participating employer. (SJCERA Tier 2)

_____ I was a member of the _____ Retirement System and began full-time employment with an SJCERA-participating employer within six months after separating from employment covered by this previous reciprocal retirement system and (check one):

____ I have left my member contributions on deposit with that system. (SJCERA Tier 1)

____ I have withdrawn my member contributions from that system. (SJCERA Tier 2)

I hereby certify that the foregoing information is true and correct and any information found to be incorrect may require corrections to my account in the San Joaquin County Employees' Retirement Association (SJCERA) including, but not limited to, my date of membership and the member contributions I am required to pay. SJCERA may make any necessary corrections to my account to ensure I am properly enrolled and eligible to receive the correct retirement benefits and can collect additional contributions, if owed, prior to retirement.

EMPLOYEE SIGNATURE _____

DATE _____

TO BE COMPLETED BY EMPLOYER ONLY:

EMPLOYING AGENCY / DEPT.: _____

Employee Hire Date: _____ Date This Form Was Given to Employee: _____

Employer Designee: _____ (Signature) Rec'd from Employee: _____

Designee Title: _____ Date: _____

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Instructions and Information

Reciprocity allows members who move from one eligible, California public retirement system to another within six months, to retain valuable retirement and related benefit rights.

RETIREMENT BENEFIT TIER STRUCTURE

Tier 1 Members: Employees who entered SJCERA membership before January 1, 2013, or establish incoming reciprocity based on employment before January 1, 2013.

Tier 2 Members: Employees who enter SJCERA membership on or after January 1, 2013, or Tier 1 members who terminate and return to a different SJCERA-participating employer after more than six months.

EMPLOYEE INSTRUCTIONS

1. As the new employee, you must complete, sign, and date the Reciprocal Self-Certification Form to certify your most recent service and first membership date in a reciprocal public retirement system in California, or indicate that you are not a member of any reciprocal system, and return to your Personnel Office within 5 business days of beginning employment.

EMPLOYER INSTRUCTIONS

1. Employers must provide the Reciprocal Self-Certification Form to all new employees eligible for membership in SJCERA and complete the indicated section upon receipt of the completed form.
2. The employer will ensure the employee is enrolled in the appropriate retirement benefit tier in the payroll system, and that the corresponding member contributions to retirement are deducted from the employee's biweekly compensation.
3. The employer must forward the original completed and signed Reciprocal Self-Certification Form to SJCERA, and retain a copy for the employer's employment records for the employee.

RECIPROCAL CALIFORNIA PUBLIC RETIREMENT SYSTEMS

Counties and participating special districts that operate under the County Employee's Retirement Law of 1937:

Alameda	Los Angeles	Sacramento	Santa Barbara
Contra Costa	Marin	San Bernardino	Sonoma
Fresno	Mendocino	San Diego	Stanislaus
Imperial	Merced	San Joaquin	Tulare
Kern	Orange	San Mateo	Ventura

Other Reciprocal Agencies:

- California Public Employees' Retirement System (CalPERS)
All agencies whose employees are members of CalPERS including state agencies, county schools, various counties, cities, and special districts.
- California State Teachers Retirement System (CalSTRS)
- Legislators' Retirement System (LRS)
- Judges' Retirement System I and II (JRS)
- University of California Retirement Plan (UCRP)

For more information on reciprocity and reciprocal systems, please see our *Reciprocity* fact sheet located at www.sjcera.org.