



MEMBERSHIP CERTIFICATION FORM

IMPORTANT: Fully complete and return this form to **SJCERA** at contactus@sjcera.org or **220 E. Channel Street, Stockton, CA 95202**. If an incomplete form is returned, a delay in services may occur.

SECTION 1: CONTACT INFORMATION

Full Name: _____ DOB: _____

SSN or Member ID: _____ Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____

SECTION 2: PREVIOUS EMPLOYMENT & RECIPROCITY

Past employment information helps determine your retirement tier, contribution rate, and reciprocity eligibility. Reciprocity lets you move between eligible government retirement systems while keeping valuable benefits. (**See page 2 for details**)

Most Recent Previous Employer: _____

Retirement System (Refer to list of system on the back): _____

Last Date of Employment: _____ First Member Date: _____

Check Applicable Statement:

☐ I have not been an active member of another reciprocal CA government retirement system within the last six months (Active members are generally permanent full-time employees. See list of retirement systems on page 3).

☐ I retired from _____ retirement system and subsequently began full-time employment with an SJCERA participating employer.

☐ I was a member of the _____ retirement system and, within six months, subsequently began full-time employment with an SJCERA participating employer.

☐ My reciprocal system membership began before Jan. 1, 2013 and I left my member contributions on deposit.

☐ My membership began on/after Jan. 1, 2013 or I withdrew my member contributions.

I have read this form and its instructions in their entirety. I hereby certify that the foregoing information is true and correct. I understand that incorrect information may require corrections to my SJCERA account including, but not limited to, my membership date, tier and contribution rate. I authorize SJCERA to establish reciprocity if I am eligible and make any necessary corrections to my account including collecting additional contributions if owed.

Employee Signature: _____ Date: _____

SECTION 3: EMPLOYER CERTIFICATION (SEE INSTRUCTIONS ON PAGE 2)

Employee Agency/Department: _____

New Employee's Job Class Title: _____

Employee Hire Date: _____

Employee Designee (Signature): _____

Designee Title: _____ Date: _____

EMPLOYEE INSTRUCTIONS

Section 2 Instructions

Your prior public plan benefit information is required to correctly determine your Tier and contribution rate.

Previous Employment with an SJCERA Employer

If you are a Tier 1 member whose contributions remained on deposit with SJCERA-covered employment, and you return to a full-time permanent position with the same SJCERA employer within six months, you will retain your previous SJCERA entry age and contribution rate. If you return to the same employer in more than six months, your entry age and contribution rate will be based on your age at re-entry into memberships. If you return to a different SJCERA employer after more than six months, you will be placed in Tier 2.

SJCERA EMPLOYERS		
San Joaquin County	Mountain House Community Services District	SJC Mosquito & Vector Control
Lathrop-Manteca Fire District	SJC Historical Society & Museum	SJC Superior Court
SJC Law Library	Tracy Public Cemetery	Waterloo-Morada Fire District

Previous Employment with another CA Government Employer (Reciprocity)

If you were a member of a reciprocal California government retirement system (see list below) within the last six months, reciprocity allows you to link your entry age, service credit and highest average compensation across all your reciprocal systems. Reciprocity may also allow you to enter SJCERA as a Tier 1 member, which offers a higher benefit formula.

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

STATE RECIPROCAL RETIREMENT SYSTEMS			
CalPERS (California Public Employees Retirement System)	CalSTRS (California State Teachers' Retirement System)	Legislators' Retirement System (LRS)	Judges Retirement System (JRS)

Membership Tiers

Tier 1 members: Employees who entered SJCERA membership before January 1, 2013, or who establish incoming reciprocity based on eligible reciprocal system membership before January 1, 2013. Tier 2 members: Employees who enter SJCERA membership on or after January 1, 2013;

Membership Tiers Continued

Tier 1 members who terminate and return to a different SJCERA-participating employer after more than six months; SJCERA retirees who return to active membership.

EMPLOYER INSTRUCTIONS

1. Collect this Membership Certification form from all new or returning full-time benefited employees, verify the date of birth is entered correctly and complete the Employer Certification section.
2. Submit the following completed forms and documents directly to SJCERA within the first week of employment:
 - ☐ Member Certification
 - ☐ Copy of employees' Birth Certificate, valid U.S. Passport, or valid California Real I.D. Card (See the Age Verification Policy on www.sjcera.org for the other acceptable documents.)
 - ☐ Beneficiary Designation
 - ☐ Safety Only - Social Security Form SSA-1945 (if applicable)