



RETIREMENT MEMBERSHIP APPLICATION
NORTH DAKOTA PUBLIC EMPLOYEES RETIREMENT SYSTEM
SFN 2561 (Rev. 01-2014)

NDPERS • PO Box 1657 • Bismarck, • North Dakota 58502-1657
(701) 328- 3900 • 1-800-803-7377 • Fax 701-328-3920

PART A MEMBER INFORMATION	
Name (Last, First, Middle)	NDPERS Member ID
Last 4 Digits of Social Security Number	Date of Birth (MO/DAY/YR)
Organization Name	NDPERS Organization ID

PART B DUAL RETIREMENT MEMBERSHIP	
Are you a member of the following retirement plans?	
<input type="checkbox"/> North Dakota Teachers Fund for Retirement (NDTFFR): Employer _____ From _____ To _____	
<input type="checkbox"/> Teachers Insurance & Annuity Association College Retirement Equities Fund (TIAA-CREF)-coverage through the ND University System: Employer _____ From _____ To _____	

PART C IMPORTANT NOTICES	
Section 1: All eligible employees of a participating employer must be immediately enrolled in the NDPERS Defined Benefit plan unless you previously elected participation in the NDPERS Defined Contribution plan. If you previously participated in the NDPERS Defined Contribution plan, you will remain a participant in the Defined Contribution plan. If you are a permanent state employee you have 6 months from taking your new position to switch from the Defined Benefit Plan to the Defined Contribution Plan. If you elect to participate in the Defined Contribution Plan, you do not have the option to switch back to the Defined Benefit Plan. If you wish to elect to participate in the Defined Contribution Plan, you will be provided a "DEFINED CONTRIBUTION RETIREMENT PROGRAM ELECTION SFN 52170". Your election is irrevocable.	
Section 2 In accordance with the North Dakota Century Code Chapter 15-39.01-09(3), if you are certified to teach in the state by the Education Standards and Practices Board and first employed and entered upon the payroll of the Department of Career and Technical Education after July 1, 2007, you may elect within 90 days from date of hire to become a member of the Public Employees Retirement System or the Teachers' Fund for Retirement. If an election is NOT made within 90 days from the date of hire, you will be transferred to the Teacher's Fund for Retirement. Additional funds will also be required to make up the employee contribution rates. Complete an "NDPERS/TFFR MEMBERSHIP ELECTION SFN 52727". Your election is irrevocable.	
Section 3 In accordance with the North Dakota Century Code Chapter 15-39.01-09(3), if you are certified to teach in the state by the Education Standards and Practices Board and first employed and entered upon the payroll of the Department of Public Instruction after January 6, 2001, you may elect within 90 days from date of hire to become a member of the Public Employees Retirement System or the Teachers' Fund for Retirement. An election made under North Dakota Century Code Chapter 15-39-1-09(3) is irrevocable. If an election is NOT made within 90 days from the date of hire, you will be transferred to the Teacher's Fund for Retirement. Additional funds will also be required to make up the employee contribution rates. Complete an "NDPERS/TFFR MEMBERSHIP ELECTION SFN 52727". Your election is irrevocable.	

PART D MEMBER AUTHORIZATION	
In accordance with the requirements of the North Dakota Public Employees Retirement System, I make application for retirement enrollment. I understand that my membership will become effective immediately or at the attainment of age 18. I declare that the foregoing statements are full, true, and correct to the best of my knowledge and belief, and are subject to the laws and penalties governing any misrepresentation and fraud. <u>Submit a "Designation of Beneficiary SFN 2560" along with this form.</u>	
_____	_____
Member's Signature	Date of Signature



PART A: MEMBER INFORMATION

For member identification, please provide all requested information.

PART B: DUAL MEMBERSHIP

Indicate if you have membership with the North Dakota Teachers Fund for Retirement (NDTFFR) or Teacher Insurance & Annuity Association-College Retirement Equities Fund (TIAA-CREF- ND Board of Higher Education) and the dates of employment and the employer's name.

PART C: IMPORTANT NOTICES

If you are a permanent state employee, please ensure that you carefully reads Section 1; this pertains to participation in the Defined Contribution plan versus the Defined Benefit plan.

If you are a certified teacher and are employed with either the Department of Career and Technical Education or the Department of Public Instruction, please ensure that you carefully read Sections 2 and 3; this pertains to your participation in NDPERS or the NDTFFR.

PART C: MEMBER AUTHORIZATION

You must sign and date the form. Your signature should reflect the name as entered in Part A. Submit a "Designation of Beneficiary SFN 2560" along with this form.

Please review form before submitting to NDPERS to ensure that ALL appropriate sections/boxes are complete.