

# **Boise State University**

## **Election Form – PERSI/Optional Retirement Plan (ORP)**

The Idaho Code states that you have a one time irrevocable option to choose between remaining in the Public Retirement System of Idaho (PERSI) or transferring to the Optional Retirement Plan (ORP).

### **Section 1**

This form is designed to serve as the required written declaration for the option you select. Please make your selection below.

Remain in PERSI. You must have 60 months of credited service. (Complete Section 3)

Transfer to the ORP (Complete Section 2 and 3)

**I have decided to participate in the ORP and I understand that:**

- A. My decision to participate in the ORP is irrevocable and that while in this position, I can never again be a contributing member of PERSI.
- B. The benefits of the ORP are not the obligation of the State of Idaho or PERSI, but solely those of the designated company.
- C. I do hereby waive for myself, my heirs and my assigns any rights to survivor and/or disability benefits under PERSI.

### **Section 2**

I elect to leave my accumulated member contributions in PERSI, and to begin participation in the ORP.

I elect to transfer my accumulated member contributions plus interest to the ORP carrier. I understand the employer contributions will not be transferred. Complete PERSI Base Plan Account Withdrawal RS108 form.

### **Section 3**

Social Security Number:

Date of Birth:

Name (please print):

Employee's Signature:

Date:

<b>To be completed by Employer</b>	RS108 form attached	
	Effective Date of ORP Election:	
	I certify that this employee is eligible to participate in the ORP and that he/she intends to enroll with the carrier designated above.	
	Please Print Name and Title:	
	Employer Representative Signature:	Date: