Statement on the Collection and Use of Social Security Numbers

Human Resources

In accordance with the requirements of Florida law (Section 119.071, Florida Statutes), the University of West Florida collects social security numbers only if specifically authorized or required by law or if imperative for the performance of the University’s duties and responsibilities. The University may collect social security numbers for some or all of the following purposes: identity tracking and management; billing and payments; credit worthiness; data collection; reconciliation and tracking; benefit processing; tax and scholarship reporting; financial aid processing; student health services, and reporting to authorized state and federal government agencies. Federal and state laws require us to protect social security numbers from disclosure to unauthorized parties. Students and employees are assigned UWF identification numbers to assist in tracking and protecting their personal information.

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Florida Retirement System (FRS) - Certification Form

This form is not an offer of employment or an enrollment form. If hired, a Retirement Choice kit may be mailed to your home with an enrollment form.

Name ___________________________ SSN ___________________________
Agency Name ___________________________

Previous or Current FRS Employer ___________________________

Complete Section I if you have never been a member of a State of Florida administered retirement plan.
Complete Section II if you are a current or previous member AND Section III if not retired OR Section IV if retired.

I. I have never been a member of a State of Florida administered retirement plan.

SIGNATURE ___________________________ DATE ___________________________

II. I was or currently am a member of the following State of Florida administered retirement plan (also complete Section III or IV)1
- FRS Pension Plan (incl. DROP)
- FRS Investment Plan
- State University System Optional Retirement Program (SUSORP)
- State Community College System Optional Retirement Program (SCCSORP)
- Senior Management Service Optional Annuity Program (SMSOAP)
- Other ___________________________

III. I am not retired from any State of Florida administered retirement plan. I understand that if it is later determined that I was a retiree and was reemployed during the first 6 calendar months after I retired or after my DROP termination date, at any time during the 7th through the 12th months after I retired or after my DROP termination date, I must repay all unauthorized benefits received (see Section IV for details), or, if in the Investment Plan, terminate my employment. My employer may also be liable for repaying any unauthorized benefits I received.

SIGNATURE ___________________________ DATE ___________________________

IV. I am retired from a State of Florida administered retirement plan. My FRS Pension Plan retirement effective date, DROP termination date, or date I received my first distribution from the FRS Investment Plan, SUSORP, SCCSORP, SMSOAP, or other plan was ___________________________.

Effective July 1, 2017, retirees of the Investment Plan, SUSORP, SCCSORP, and SMSOAP are eligible for renewed membership in the Investment Plan, SUSORP, or SCCSORP.

I understand that as a Pension Plan retiree:
  a. If I am employed by an FRS-covered employer in any type of position2 during the first 6 calendar months after I retired or after my DROP termination date, my retirement and DROP status are voided, all retirement and DROP benefits I received must be repaid,3 and I must reapply for retirement in order to receive future benefits.
  b. If I am reemployed by an FRS-covered employer at any time during the 7th through the 12th months after I retired or after my DROP termination date, my monthly retirement benefit must be suspended4 and any unauthorized benefits received must be repaid.3 My employer may also be liable for repaying any unauthorized benefits I received.

I understand that as an Investment Plan, SUSORP, SCCSORP, or SMSOAP retiree:
  a. If I am employed by an FRS-covered employer in any type of position2 during the first 6 calendar months after I retired, I must repay3 any benefits received or terminate employment for an additional period to satisfy the 6 calendar month termination requirement.
  b. If I am reemployed by an FRS-covered employer at any time during the 7th through the 12th months after my retirement, I will not be eligible for additional distributions until I terminate employment or complete 12 calendar months of retirement.4

SIGNATURE ___________________________ DATE ___________________________

1 If you are not retired and earned FRS service after certain periods in 2002 (depending on your employer), you must rejoin the FRS retirement plan you were enrolled in when you terminated FRS-covered employment. You may have a one-time 2nd Election to switch FRS retirement plans. Also, alternative retirement programs are available to certain employees. Contact your employer for deadline and other information.
2 Positions include OPS, temporary, seasonal, substitute teachers, adjunct professors, part-time, full-time, regularly established, etc.
3 Florida law requires a return of all unauthorized Pension Plan benefit payments or Investment Plan distributions received by a member who has violated the FRS termination or reemployment provisions. Similar provisions apply to unauthorized SUSORP; SCCSORP, or other state-administered plan distributions – contact that plan’s administrator for details.
4 There are no reemployment exemptions/exceptions for Pension Plan members whose effective date of retirement or DROP termination date is on or after July 1, 2010 or Investment Plan, SUSORP, SCCSORP, or SMSOAP members who retire on or after July 1, 2010.

Retiree Definition
You are considered retired if:
1. You have received any benefits under the FRS Pension Plan (including DROP), or
2. You have taken any distribution (including a rollover) from the FRS Investment Plan, or other state administered retirement programs offered by state universities (SUSORP), state community colleges (SCCSORP), state government for senior managers (SMSOAP), or local governments for senior managers.

Certification Form

Fax To: 850-857-6030 – Attention: Retirement Section

University of West Florida, 11000 University Parkway, Human Resources, Pensacola, FL 32514

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