

CURRENT AND FORMER IDAHO STATE SERVICE

1. Legal Name _____ SS# _____

2. Idaho State Employment Status:

Transfer Employee _____ Former Employee _____ PERSI Retiree _____

Non-Transfer Employee _____ (“Non-Transfer Employee” applies if you are currently on benefits with another Idaho state agency and you are being hired in an additional appointment at BSU.)

3. State Agency Name: _____

4. Original Hire Date with the State: Month ____ Day ____ Year ____

5. Separation Date from Previous State Agency (if applicable): Month ____ Day ____ Year ____

6. Retirement Plan: AIG VALIC _____ PERSI _____ TIAA-CREF _____

7. If you are a transfer employee, are you currently enrolled in any of the following plans?

Flexible Spending _____ NCPERS _____ PERSI Choice _____ 403(b) _____ 457(b) _____

Blue Cross Enrollment: Traditional _____ PPO _____ Supplemental Life Insurance _____

8. If you are a PERSI Retiree, enter your date of retirement: Month ____ Day ____ Yr ____

9. If you are a Non-Transfer Employee, we are required to deduct retirement contributions from your BSU paycheck. Please be sure to indicate your retirement plan on line 6.

If you have questions about this form, please ask to speak with a benefit staff member.