



**CalPERS “Classic” Eligibility Form for Employees
Hired Before June 18, 2017
PLEASE RETURN TO THE OFFICE OF RETIREMENT
SERVICES BEFORE **DECEMBER 1, 2017****

REC100

For current employees who have CalPERS “Classic” Service hired between August 4, 2013 and June 18, 2017 in the Police Department and between January 2, 2015 and June 18, 2017 in the Fire Department.

Member Name (Last, First, Middle Initial)	Employer Section
Mailing Address	Department
City, State, Zip Phone: Home or Cell ()	Employee ID
Social Security Number	

CalPERS “Classic”: I have previously been a member of a CalPERS or reciprocal agency and qualify for the CalPERS “Classic” retirement/pension benefit. I understand that this means that I was employed by a CalPERS reciprocal agency before January 1, 2013, and I do not have a break in service of more than six (6) months and do NOT have concurrent service (overlapping service). I understand that I will be placed in the Tier 1 “Classic” pension benefit and the final accrual rate will depend on my years of service with the City of San Jose. I understand that I must attain the age of 50 with 25 years of City Service or age 55 with 20 years of City service to qualify for service retirement. I understand that neither I nor my spouse or dependents will be eligible for retiree health benefits. I also understand that this means that at my previous agency I was in a position that received retirement benefits. I acknowledge that my previous service must be verified, and in the event that I am found to not be eligible for the CalPERS “Classic” benefit, I will remain in Tier 2. I understand that this is the first step in claiming reciprocity and that final verification will take place at the time of retirement. I understand that I must submit any eligibility documentation including the CalPERS Reciprocity Election Form attached to this form **by December 1, 2017**.

I understand that, if for any reason, I do not qualify for the CalPERS “Classic” benefit, I will remain a member of Tier 2. I also understand that I must claim and retire with reciprocity to receive the CalPERS “Classic” benefit. If I break reciprocity before retirement, I acknowledge that my retirement benefit will be calculated only on my service with the City of San Jose.

With these understandings, I voluntarily sign this form.

Signed:

Received by:

Employee Date

Name Date

Attachment