



King County

Benefits, Payroll and
Retirement Operations

RETIREMENT STATUS FORM

Employee completes this section only*

Employee name (please print clearly) _____

Employee ID _____ Birth date _____

Retirement means receiving a lifetime, defined benefit. Members who are only separated or who are only receiving Plan 3 defined contributions do not meet the definition of retirement.

1. Are you retired from one of the Washington State Retirement Systems? Yes No
2. Are you retired from or have you ever been a member of the Seattle, Spokane or Tacoma Employees' Retirement System? Yes No
If yes, which one? _____
3. Are you currently employed by another public employer and contributing to a Washington State Retirement System? Yes No

Employee Signature _____ Date _____

Do Not Complete This Section

Only Benefits, Payroll and Retirement Operations completes this section

Document previous retirement membership using MRV.

If the employee answered "yes" to any of the questions above, contact DRS Employer Support Services at drsemployer@drs.wa.gov.

Has the employee ever been a member of a Washington State Retirement System? Yes No

If yes, what system and plan?

- | | | | |
|--|---------------------------------|---------------------------------|---------------------------------|
| Teachers' Retirement System | Plan 1 <input type="checkbox"/> | Plan 2 <input type="checkbox"/> | Plan 3 <input type="checkbox"/> |
| School Employees' Retirement System | | Plan 2 <input type="checkbox"/> | Plan 3 <input type="checkbox"/> |
| Public Employees' Retirement System | Plan 1 <input type="checkbox"/> | Plan 2 <input type="checkbox"/> | Plan 3 <input type="checkbox"/> |
| Public Safety Employees' Retirement System | | Plan 2 <input type="checkbox"/> | |
| Law Enforcement Officers' and Fire Fighters' Retirement System | Plan 1 <input type="checkbox"/> | Plan 2 <input type="checkbox"/> | |
| Washington State Patrol Retirement System | Plan 1 <input type="checkbox"/> | Plan 2 <input type="checkbox"/> | |
| Judicial Retirement System | <input type="checkbox"/> | | |

Is the employee a retiree of a Washington State Retirement System? Yes No

I have verified the information above by using MRV or contacting a DRS representative.

Employee Signature _____ Date _____

Send form with completed employee section to:

Benefits, Payroll and Retirement Operations, CNK-ES-0240

*RCW 41.50.139 requires employers to solicit this information from all new employees.