Human Resources

Human Resources
Dept. 3422
1000 E. University Ave.
Laramie, WY 82071-2000

Hill Hall, 3rd Floor

Phone (307) 766-2437
Fax (307) 766-5636

RETIREMENT PLAN OPTION FORM

I, _____, the undersigned, do hereby acknowledge that I have read this document in its entirety and understand the contents herein, and have been fully advised that:

1. As an employee of the University, I am eligible for retirement benefits under either the Wyoming Higher Retirement Act (Wyoming Statutes, 1977, 21-19-101 to 21-19-106) or the Wyoming Retirement System (Wyoming Statutes, 1977, 9-3-401 et seq).
2. Pursuant to the above-mentioned Wyoming Statutes, the University of Wyoming is authorized to offer its employees the following option:
    a. All contributions may be paid entirely into the Wyoming Retirement System.
    b. All contributions may be paid entirely in the TIAA Annuity Plan.
3. The election of a retirement plan is irrevocable during the remainder of an employee's working career as a public employee (Wyoming Statutes, 21-19-102 (d)).

NOW, THEREFORE, in consideration of the above, I elect as follows:

My employee and employer contributions shall be paid into _____ (either A or B above)

☐ By checking this box, I am making notification that I will be working as a law enforcement officer as defined by Wyoming Statute 9-3-402.

_____
Signature (required)

_____
Date

_____
Social Security Number

PLEASE NOTE;
If Option A is chosen, the employee will be contacted via the UW e-mail address with instructions for designating a beneficiary.
If Option B is chosen, the TIAA Enrollment Form must be completed online at https://www.tiaa.org/public/tcm/wyoming.
Completed form can be scanned and emailed to claud@uwyo, or faxed to 307-766-5636.

The University of Wyoming is an Equal Opportunity/Affirmative Action Employer