



State of New Jersey • Department of the Treasury
DIVISION OF PENSIONS & BENEFITS — ENROLLMENT SECTION
P.O. Box 295, Trenton, NJ 08625-0295
REPORT OF TRANSFER / MULTIPLE ENROLLMENT FORM

[] REPORT OF TRANSFER or [] MULTIPLE ENROLLMENT (PERS and TPAF Only)

PART 1 — MEMBER INFORMATION

- 1. Retirement System [] PERS [] TPAF [] PFRS
2. Membership Number _____ 3. Social Security Number _____
4. Name Last First Middle Maiden
5. Address Street City State Zip Code
6. Phone Number _____

PART 2 — EMPLOYER INFORMATION

- 7. Name of Former Employer _____
8. Date of Last Pension Deduction Reported by Former Employer _____ 9. Termination Date ____ / ____ / ____
Month/Year or Pay Period/Year
10. Name of New Employer _____
11. New Employer Location/Payroll Number _____ 12. Is New Employer a Board of Education? [] Yes [] No
13. Title of New Position _____ 14. Date Current Employment Began ____ / ____ / ____

To be completed for TPAF applications only

- 15. Date Employment Began ____ / ____ / ____ (Do not include temporary or substitute service)
16. Does position require a New Jersey State Certificate issued by the State Board of Examiners within the N.J. Department of Education? [] Yes [] No
17. Does the applicant hold a certification issued by the State Board of Examiners within the N.J. Department of Education? [] Yes [] No
18. For N.J. Department of Education Only: Is the position Unclassified Professional? [] Yes [] No

- 19. Is the applicant a Workers' Compensation Judge? [] Yes [] No
20. Is the applicant appointed under the authority of a local ordinance to a statutory-based, untenured chief administrative position such as business administrator, county or municipal administrator, county or municipal manager? [] Yes [] No
21. Is the applicant filling a position with principal operating responsibility of a government function(s), commonly called "department heads" or similar title, that are filled by action of the governing body and who directly report to an elected official(s) or chief administrative officer? [] Yes [] No
22. Is the applicant working under a professional services contract? [] Yes [] No
23. Is the applicant a bona fide employee serving in a professional services position such as an attorney, engineer, planner, doctor, or accountant at a local government entity? [] Yes [] No
24. Current Annual Base Salary \$ _____ 25. Employee is paid on: [] 10-month basis [] 12-month basis
26. Are the work hours fixed at 32 hours (Local) or 35 hours (State) or more per week? [] Yes [] No
27. Is employee currently employed by more than one public agency? [] Yes [] No

I certify that this employee and position meets the eligibility criteria for the retirement system as provided by law. I further certify that I have successfully completed the online training and Annual Membership Certification required by N.J.S.A. 43:3C-15. I acknowledge that I am subject to penalty for falsifying or permitting to be falsified any record, application, form, or report of the retirement system in an attempt to defraud the system pursuant to N.J.S.A. 43:3C-15. Two signatures required.

Print Certifying Officer's Name Signature Date
Print Certifying Officer's Supervisor's Name Signature Date
Phone Number

INSTRUCTIONS

This form is to be completed for any member who leaves one New Jersey public employer to take a job with another New Jersey public employer but remains in the same retirement system. It is also used to establish multiple enrollment in the retirement system. A member establishes multiple enrollment when he or she is employed by more than one public agency at the same time in a position that is eligible for membership in the same retirement system.

If the new employment is covered by a different retirement system, an *Application for Interfund Transfer* should be completed instead of this form.

The *Report of Transfer/Multiple Enrollment Form* should be filed with the New Jersey Division of Pensions & Benefits (NJDPB) within 10 working days of the date employment begins. The employer should establish that the employee's membership in the retirement system has not expired or been withdrawn. If the employee's membership has expired or been withdrawn, the employee must complete a new *Enrollment Application*.

The NJDPB will process the *Report of Transfer/Multiple Enrollment Form* and will send a *Certification of Payroll Deductions* to the new employer advising the employer of the date pension deductions must begin for the transferring employee.

If any items on this form are incomplete or left blank, it will delay the processing the member's transfer or multiple enrollment. This may result in additional back pension contributions and create a hardship for the member. Therefore, the certifying officer should ensure that all items are complete prior to submission of this form.

Return completed form to:

**New Jersey Division of Pensions & Benefits
Enrollment Section
P.O. Box 295
Trenton, NJ 08625-0295**