

NOTICE OF EXCLUSION FROM Calpers MEMBERSHIP

SOCIAL SECURITY NUMBER	System (CalP	r has contracted with the California F ERS) to provide an employee benefit ath, and disability benefits.			
2. CURRENT NAME (LAST)	(FII	RST)	(MIDDLE)		
3. NAME OF PUBLIC AGENCY 4. D		PARTMENT OR SCHOOL DISTRICT	5. JOB	5. JOB OR POSITION TITLE	
6. TERM OF APPOINTMENT ☐ PERMANENT ☐ TEMPORARY	OF WHO	7. IF TEMPORARY, ENTER NEAREST NUMBER OF WHOLE MONTHS THE APPOINTMENT IS EXPECTED TO LAST.		8. APPOINTMENT DATE MM DD YYYY	
		MONTHS			
9. TIME BASE FULL-TIME INDETERMINAT	E PA	RT-TIME IF PART TIME, ENTER THE	E FRACTION (OF FULL TIME:	
In your present position with th	is agency, ye	ou are excluded from CalPER	S members	hip because:	
Your full-time seasonal of	or limited term	n appointment is limited to 6 mor	nths or less.		
Your part-time appointm one year.	ent is limited	to less than an average of 20 ho	ours per wee	ek for less than	
	bership until y	ittent, emergency, substitute, or you have worked 1,000 hours (o			
4. Your position is excluded	d by law or by	contract agreement which excl			
5. You are an independent	contractor.				
You are employed to rer Exceptions: Persons holding		onal legal service to a city. attorney, deputy city attorney, or assista	int city attorney	′ .	
		by a school district in a position on the same district (for County Sch		for students	
deposit or service credit), en in your present position. Be	xclusions 1, 2 sure to notify	S by previous employment (either, and 3 do not apply to you and your employer to complete a (Fport your employment to CalPE	you should PERS-1) Me	be a member	
If you believe that your employment for an explanation. If you still have to the Actuarial & Employer Servi Sacramento, CA 94229-2709, state	e doubts, yo ices Branch,	ou may appeal directly to CalP Membership Analysis & Desi	ERS by sei gn Unit, P.0	nding a letter D. Box 942709,	
SIGNATURE OF CERTIFYING OFFICER		TITLE		DATE	
SIGNATURE OF EMPLOYEE				DATE	

NOTE: Benefits provided by CalPERS are described in the "CalPERS Benefits" information booklet available from your employer.

PERS-AESD-139 (3/08)