

THE GEORGE WASHINGTON UNIVERSITY

WASHINGTON, DC

401(a) RETIREMENT PLAN PRIOR EMPLOYMENT VERIFICATION

Contributions will begin after this completed form is received and processed by Benefits Administration

Two years of service at GW are required for participation in the GW Retirement Plan for Faculty and Staff (401(a) Plan). Service with another educational organization described in IRC Section 170(b)(1)(A)(ii) or 511(a)(2)(B), or with a college or university located outside the United States with accreditation or similar designation from the country where it is located, may count towards the service requirement. For prior service to qualify, you must show 1 or 2 full years of creditable service. A year of creditable service is a 12 consecutive month period during which you were credited with at least 1,000 hours of service. Credit will be granted for full years of service only. Also note the years do not have to be consecutive; credit will be given for applicable service that occurred at any time in your employment history with a qualifying educational institution.

If you are credited with 2 years of service under the Plan, you will be eligible to receive university contributions under the Plan effective the first of the month following receipt of your form in good order. If you are credited with 1 year of prior service, you will be eligible to receive university contributions under the Plan on the first of the month following your 1 year anniversary with GW. If you do not receive any credit for prior service, you will receive university contributions under the Plan after you complete 2 years of service with GW.

1. EMPLOYEE AUTHORIZATION

Name _____ Other Name Used, if applicable _____

Social Security # _____ Dates of Employment _____

Mailing Address: _____

Formerly employed by the George Washington University? ____ Yes ____ No

Former Employer (University/College) _____

I authorize my former employer to supply the George Washington University with the information requested below and for my former employer to respond to any follow up questions from GW about the information provided.

Signed _____ Date _____

2. PRIOR EMPLOYER VERIFICATION

The individual listed above is a former employee of your educational institution, and has signed this form authorizing you to verify the following information. The information that you provide will be used solely to determine eligibility for the George Washington University 401(a) Retirement Plan for Faculty and Staff. **This form should be returned to your former employee at his/her mailing address above.** If you have any questions, please contact the GW Benefits Administration Office at 571-553-8382 or e-mail benefits@gwu.edu.

The employee listed above was employed by _____

From _____ To _____ Last Position Held _____

How many years did the employee work at your institution (a "year" is defined as a 12 consecutive month period of at least 1,000 hours)? ____

If faculty, please state the number of academic years the employee had a full-time faculty appointment? ____

Employment at this institution was ____ Full-Time ____ Part-time

If your institution is located within the US, does your institution hold tax-exempt status under IRS Code Sections 170(b)(A)(ii) or 511(a)(2)(B)? (see your organization's Form 990)? ____ Yes ____ No

IRC section 170(b)(A)(ii) – a tax exempt educational organization which normally maintains a regular faculty and curriculum and normally has a regularly enrolled body of pupils or students in attendance at the place where its educational activities are regularly held. **IRC section 511(a)(2)(B)** – state colleges and universities.

If your institution is located outside the US, is your institution accredited or has it received a similar designation or recognition as a college or university from the relevant private or governmental body in the country where your institution is located? ____ Yes ____ No

List governing body _____

Signed _____ Title _____ Date _____

Contact Phone # _____ E-Mail Address _____