ERS OCS
06/13

OFF-SITE COUNSELING SERVICES

ERS INDIVIDUAL RETIREMENT APPOINTMENT FORM

Employees' Retirement System of Alabama
P. O. Box 302150 ♦ Montgomery, AL 36130-2150
334-517-7000 or 877-517-0020
www.rsa-al.gov

Please type or print all information clearly.

Name: _____
First Middle Given Last Maiden

Address: _____
Street or P. O. Box City State Zip

Date of Birth: ____/____/____ **Social Security #:** ____-____-____ and/or **PID #:** _____

Sex: ☐ Male ☐ Female **Email Address:** _____

Work Phone: (____) _____ **Home Phone:** (____) _____ **Cell Phone:** (____) _____

If you need information about purchasing prior or withdrawn service or any other issues you wish to discuss during your appointment, please indicate such on the back of this form.

***Proposed Retirement Date:** Month _____ 1, Year _____

Are you participating in DROP at this time? ☐ Yes ☐ No

Employer: _____ **Number of Years of Service: **** _____

** Date will be used to calculate an estimate of benefits.*
*** Do not include service credit you intend to purchase – must be service credit as of today.*

Please complete this section:

Number of sick days: _____ **Current Contract Type:** (*check one*) ☐ 12 months ☐ 10 months ☐ 9 months

Job Classification (Principal, Bus Driver, Teacher, etc.): _____

List 2 site choices for your individual counseling appointment.

1st Choice: _____
Location

2nd Choice: _____
Location

Mail this request form to: ERS Benefits Division ♦ Attn: OCS Appointments ♦ P.O. Box 302150 ♦ Montgomery, AL 36130-2150

- You will be notified by mail 4 weeks prior to your session stating your **appointment date and time**.
- **Day and Time slots are filled in time order and are not subject to change.**
- No field appointments will be made by phone and no faxes or emails will be accepted to register.
- To **cancel** your appointment, please call the Retirement Systems of Alabama at 877.517.0020. Request to speak to the Field Appointment Coordinator in the ERS Benefits Division. Cancellations should be made as soon as possible but no later than 1 week prior to the appointment. There is generally a waiting list for each appointment.
- To receive a confirmed appointment, you must be **within 3 years of retirement eligibility**. If your file indicates otherwise, you will not be scheduled for a counseling appointment but will be notified of the inaction.

Signature of Applicant: _____

For RSA Office Use Only:
Date:_____
Order:_____
Confirmed with Letter:
_____