



# University of Colorado

Boulder | Colorado Springs | Denver | Anschutz Medical Campus

## EMPLOYEE SERVICES

### 401(a) Optional Retirement Plan (ORP) Enrollment/Change Form

#### INSTRUCTIONS

1. Review the [Retirement Pension/Savings Plan Fact Sheet](#) on the website for additional information.
2. Complete this form if you want to enroll in the 401(a) Optional Retirement Plan (ORP) and/or change your fund sponsor allocation.
3. Submit this form and the required attachments to Employee Services by the 10th of the month in which the change is to be effective.
4. If enrolling for the **FIRST** time with a new Fund Sponsor(s), you are required to complete the fund sponsor application, attach it to this form and submit it to EMPLOYEE SERVICES.
5. Review, SIGN and Date the backside of this form.

#### EMPLOYEE INFORMATION

Name (Last)	(First)	(Middle Initial)	HRMS Employee ID Number
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Date of Birth (mm/dd/yyyy)	Date of Employment	Campus Department	Campus Telephone
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Home Telephone	E-Mail Address
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#### ENROLLMENT TYPE

New Enrollment     Change in Fund Sponsor Allocation    **Effective Date** \_\_\_\_\_

**FUND SPONSOR ALLOCATION** - Total of all Fund Sponsor allocation(s) must equal 100%. Allocate my total contribution (5% employee and 10% employer contribution) to the Fund Sponsor(s) listed below:

Fidelity Investments \_\_\_\_\_%    TIAA-CREF \_\_\_\_\_%    Vanguard \_\_\_\_\_%

#### ACKNOWLEDGEMENT

I understand and agree to the following:

- a) I must complete and attach an investment application and beneficiary designation form with the selected fund sponsor(s). Failure to do so will result in my contributions being placed into a Lifecycle fund that is appropriate for my age group with TIAA-CREF.
- b) If I am enrolled in the TIAA-CREF Lifecycle Account, I understand it is my (the employee's) responsibility to reallocate or transfer these funds to my selected fund sponsor. **The University is not responsible for any lost interest due to the investment of funds into the Lifecycle Account.**
- c) If I was hired prior to September 1, 1991 and enrolled in TIAA-CREF only, I will submit a completed Supplemental Annuity Release & Waiver form prior to enrollment with Fidelity Investments or The Vanguard Group.

- d) If my appointment is terminated or becomes ineligible for participation in the ORP retirement plan, I understand my participation will automatically end.
- e) I understand if EMPLOYEE SERVICES does not receive the required forms and supporting documents, my request may be returned/delayed. No retroactive adjustments will be made.

**AUTHORIZATION and SIGNATURE**

I acknowledge my enrollment in the 401(a) Optional Retirement Plan (ORP) as indicated above. I understand the University will deduct the appropriate contribution from my eligible employee gross earnings, which will be tax deferred. I also understand the University employee and employer contribution amounts, percentages, limits, or other provisions of the ORP are subject to change, and that any change will not end my participation unless expressly permitted or directed by the ORP.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

**How to Return Your Form**

**By Mail**

Make a copy for your records and send the original to:  
University of Colorado  
EMPLOYEE SERVICES  
1800 Grant Street, Suite 400  
Denver, CO 80203

**By Fax**

303-860-4299  
Keep a copy of the fax transmission report with your form for your records.

**In Person**

Bring your completed original form and a copy for your records to EMPLOYEE SERVICES. The Administrative Center (Front Desk), will date stamp both your original form and your copy. EMPLOYEE SERVICES will keep the original.

**FOR EMPLOYEE SERVICES OFFICE USE ONLY**

Jobcode:	Effdt:	Job %:
Date Processed:	Processed by:	

ORP Enrollment Change Form – Revised 7-11-2013