

Reset Form

# The University of Tennessee Hybrid Retirement Plan Premium Distribution Specification Form

Name \_\_\_\_\_  
Last First MI

Personnel Number \_\_\_\_\_

Cost Center \_\_\_\_\_ Hire Date \_\_\_\_\_

<input type="checkbox"/>	New Enrollment
	Full-Time
<input type="checkbox"/>	Part-Time
<input type="checkbox"/>	Change of Distribution- Date: _____
<input type="checkbox"/>	Restart Contributions Date: _____

**PART I:**

Participation Election — Indicate choice by placing a check in the appropriate box

I hereby elect to participate in the **Optional Retirement Program Hybrid** and, thereby, waive my right to participate in the Tennessee Consolidated Retirement System. (Complete Part II & Part III)

**OR**

I hereby elect to participate in the **Tennessee Consolidated Retirement System Hybrid**, and thereby, waive my right, at this time, to participate in the Optional Retirement Program. (Complete Part III)

I have read the foregoing instrument and have elected to join either the ORP Hybrid or the Tennessee Consolidated Retirement System Hybrid and execute a waiver of all prospective benefits in the plan for which I have elected not to join.

**PART II:**

You may specify distribution of your ORP Hybrid premiums among the three companies. You must specify a percentage (no fractions) to each company in such a way that the sum of the percentages equals 100%. Each percentage must be a whole number.

**WARNING! If you are specifying a distribution to a company for the first time, you must complete the enrollment process for that company.**

Online Confirmation Number: \_\_\_\_\_  
or Enrollment Date & Time

Company Name	Code Number	Distribution
Total Distribution to TIAA/CREF	403586	_____%
Total Distribution to VALIC	25500	_____%
Total Distribution to VOYA/ING	VF2294	_____%

**PART III:**

Signature \_\_\_\_\_

Date \_\_\_\_\_