HEALTHCARE POLICY & BENEFIT SERVICES DIVISION

ENROLLMENT FORM
RETIREE HEALTH FUND

SUBMIT COMPLETED FORM TO YOUR AGENCY HUMAN RESOURCES/ PAYROLL OFFICE

CO-1300 (Rev 11/2011)

EMPLOYEE INFORMATION			
	Employee Name (last, first, middle initial)	Former Name	Employee Number
	Social Security Number	Department ID	Job Record Number
	Street Address	Date of Hire	Date of Birth
	City, State, Zip Code	Office Telephone No.	Home Telephone No.
	Name & Address of Employing Agency	Is Exemption Claimed? ☐ Yes ☐ No	Is Employee healthcare-eligible? ☐ Yes ☐ No

PRIOR SERVICE			
	List any prior State service during which you made Retiree Health Fund Contributions	Dates of Service	
	Agency	From	To
	Did you receive a refund of your Retiree Health Fund Contributions? ☐ Yes ☐ No		

EMPLOYEE ACKNOWLEDGEMENT: I understand that completion of this form is for the purpose of monitoring my obligation to contribute to the Retiree Health Fund and that such deduction will continue until I have made such contributions for 10 years or until I retire, whichever comes first. I acknowledge that the Deduction Stop Date shown below is only an estimate and that any unpaid leave of absence may extend the period of time during which I am required to make this contribution.

Employee Signature	Date
Deduction Type: ☐ OPEB ☐ OTRS (Teachers Retirement System Members only)	**Deduction Start Date** (Month/Date/Year) __ /__ /____ **Deduction End Date:** __ /__ /____

Basis for exemption (Check One)

☐ Exempt employment category -- **Circle one:** Adjunct faculty / Not Healthcare Eligible / Seasonal Employee / Not eligible for Retirement Plan participation

☐ Other retiree coverage -- Attach signed Affidavit (CO-1303) and Waiver Form (CO-1304)

☐ Employee has completed Retiree Health Fund contributions

AUTHORIZED AGENCY SIGNATURE	TITLE Assistant Director of Human Resources	DATE
AGENCY CONTACT (PRINT NAME) Lisa Lengel	AGENCY CONTACT NUMBER 203-837-8666	

MAKE A COPY FOR YOUR RECORDS
If an exemption is claimed, return this form to OSC, Healthcare Policy & Benefit Services Division, 55 Elm Street, Hartford, CT 06106.