

NOTICE OF NON-COVERED EMPLOYMENT OR PROVISIONAL COVERAGE



Relating to PERA's Coordinated, Correctional or Police & Fire Plans

Public Employees Retirement Association 60 Empire Dr., Ste. 200, Saint Paul MN 55103-2088
Employer Fax Number: 651-296-2493; Employer Lines: 651-296-3636 or 1-888-892-PERA (7372)

For Employer: This form must be completed when a person is employed in a position under your unit that is excluded from PERA membership because the employee's annual earnings are less than the minimum salary threshold in M.S. §353.01, Subd. 2a, or when an employee is being given provisional retirement plan membership that will be subject to an earnings validation by PERA. You are encouraged to use this form to provide written disclosure to *any* worker not enrolled in PERA at the start of employment so that the affected person is informed about the eligibility determination. Please give this form to the affected employee and keep a copy in your personnel files; do not send a copy to PERA.

For Employee: If you have questions about the PERA membership decision made by your employer, you are encouraged to contact the human resource or payroll personnel of your employer. If you want PERA to review your employment for membership purposes, state law gives you a right to request a review by sending a request to PERA's Executive Director at 60 Empire Dr., Ste 200, Saint Paul, MN 55103.

Name of Employee	Job Title or Classification	Starting Date for this Position
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The purpose of this notice is to inform you of the following determination relating to membership under a Defined Benefit Plan administered by PERA. Please review Section A or B as checked below.

SECTION A: YOU ARE EXCLUDED FROM PERA MEMBERSHIP BECAUSE:

- 1. Our agency is stipulating that your annual compensation is not expected to exceed:
 \$5100 or \$3800 for school term employment (9-month position)
- 2. Your employment is predetermined to be temporary and is not expected to exceed six consecutive months.
- 3. Your seasonal appointment is not expected to exceed 185 consecutive calendar days in a year.
- 4. You are under age 23 and attending classes full-time at an accredited school, college or university.
- 5. You are receiving a monthly retirement or disability benefit from PERA.
- 6. Your position is excluded by law for the following reason: _____

SECTION B: YOU ARE BEING ENROLLED INTO PERA ON A PROVISIONAL BASIS AND THAT MEMBERSHIP WILL BE SUBJECT TO VALIDATION.

Our entity is unable to accurately determine that your annual compensation will not exceed the minimum salary threshold for PERA participation as noted below because your employment is intermittent, sporadic, or casual, without a regular work schedule and a regular number of work hours:

- \$5100 or \$3800 for school term employment (9-month position)

Because your annual earnings could exceed the above-referenced earnings threshold, you are being reported to PERA for membership. PERA will review the amount of annual earnings you receive and if your earnings in a year do not exceed the threshold amount set in law for PERA membership, your participation will be deemed invalid and your member contributions will be refunded to you by PERA.

Name of Employer	Name of Employer Representative	Daytime Phone No.	Date
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