ELECTION CHECKLIST FOR EMPLOYEES **RETURNING FROM** MILITARY ACTIVE DUTY		

Print Name (Last, First, MI):		**SSN:**	

Initials	**Section I – _Return to Employment_ (RTE)**		
	I elect to Return to Employment on:		Military Orders Ended On:

Initials	**Section II – Reemployment Application Deadline**	
	To protect reemployment rights under USERRA, a returning individual must make a timely application for reinstatement to his or her position after completion of military service.	
	Period of Leave	**Timely Notice**
	Under 31 days of military service	1 day after discharge (plus 8 hours)
	31 to 180 days of military service	14 days after discharge
	181 or more days of military service	90 days after discharge

Initials	**Section III – Retirement Benefits**
	Upon return to employment, you **may** request to make up contributions that would have been allowed to the plan during the period of active duty over a period of 3 times the length of military leave, but no more than 5 years. If you choose not to make up the contributions, **No** matching contributions will be contributed. The request must be in writing and sent to HR along with a DD 214 (must include type of discharge) documenting the period of service**.**
YES or NO	Do you want to begin the procedures to contribute **Makeup Contributions** for the period of military active duty performed?
YES or NO	Do you want to begin the procedures to contribute **Catch-up Contributions** if applicable for the period of military active duty performed?
	I elect to contribute **Makeup Contributions** in the following amounts: $_____ for Plan Year _____ $_____ for Plan Year _____ $_____ for Plan Year _____ $_____ for Plan Year _____
	I elect to contribute **Catch-up Contributions** in the following amounts: $_____ for Plan Year _____ $_____ for Plan Year _____ $_____ for Plan Year _____ $_____ for Plan Year _____

Section IV – Final Statement of Understanding			
I understand my benefits and elections:	**Signature:**		**Date:**
Address:			**Phone #:**