

# PARTICIPATION—

## “STEPS TO ENROLL EMPLOYEES IN IMRF”

**Do not** submit this check list to IMRF—for employer’s use only.

Use this check list as a reference only or place a copy in the member’s file. The completed check list provides documentation of the participation application process and should **not** be submitted to IMRF.

### To know whether an employee should be enrolled in IMRF:

- Does the employee meet your Hourly Standard? (*Refer to your Employer Access account if you are not sure of your employer’s Hourly Standard.*)
- Use IMRF’s worksheet pamphlet “Should this employee be enrolled in IMRF?”

### Is the employee receiving an IMRF pension?

- Contact IMRF immediately at 1-800-275-4673. Failure to inform IMRF of a return to work that qualifies for IMRF participation could result in **significant financial repercussions for a retiree.**

### Steps for enrolling an employee for participation in IMRF:

- \_\_\_\_\_ 1. Employer completes IMRF worksheet pamphlet “Should this employee be enrolled in IMRF?”
- \_\_\_\_\_ 2. Authorized Agent submits Notice of Enrollment in IMRF via Employer Access (paper form 6.10 if employer does not have Internet Access)
- \_\_\_\_\_ 3. Employer notifies its payroll department of IMRF deduction for new member
- \_\_\_\_\_ 4. Member will receive a partially pre-filled Designation of Beneficiary (Form 6.11) from IMRF and will complete and mail to IMRF directly. IMRF will follow up with the member if he or she does not return Form 6.11.

### Special Conditions of Participation (if applicable):

- \_\_\_\_\_ **Omitted service:** Members who work or have worked in IMRF covered positions but have never been reported may obtain past service credit for the period of omission (Form 6.05).
- \_\_\_\_\_ **Resolution for Elected Officials:** Resolution for qualifying Elected Officials to participate in IMRF (Form 6.64) must be on file with IMRF. The Online Enrollment application will create a partially pre-filled Form 6.64 for you to print and have the member sign.
- \_\_\_\_\_ **Election to Participate:** Election for qualifying positions (Elected Officials and City Hospital Employees) to participate in IMRF (Form 6.21). The Online Enrollment application will create a partially pre-filled Form 6.21 for you to print and have the member sign.
- \_\_\_\_\_ **Retroactive Service:** Application for retroactive service credit (Form 6.04) for Elected Officials and City Hospital Employees who worked in qualifying positions prior to their enrollment in IMRF.
- \_\_\_\_\_ **Police Chiefs:** If the member is a police chief eligible for transfer into the Sheriff’s Law Enforcement Personnel plan (SLEP), complete Form 6.22. The Online Enrollment application will create a partially pre-filled Form 6.22 for you to print and have the member sign.