

**VERIFICATION OF EMPLOYMENT WITH A WISCONSIN  
RETIREMENT SYSTEM (WRS) EMPLOYER PRIOR TO JULY 1, 2011**

Under Act 32, employers must consider any employment an employee worked with a participating WRS employer prior to July 1, 2011 to determine WRS eligibility. Therefore, any employee who received earnings for services rendered from a participating WRS employer including seasonal, project, limited-term, temporary and/or part-time, members of boards and commissions, and elected officials fall under the old statutory WRS eligibility criteria. Some examples of public employers that participate in the WRS are: cities (except Milwaukee), counties (except Milwaukee), school districts, villages, towns, etc. Please complete this form so your employer may identify your WRS eligibility criteria. **This form needs to be returned to your employer within the first week of hire.**

Employee's Name: \_\_\_\_\_

Employee's Social Security/ID Number: \_\_\_\_\_

Employee's Start Date with Current WRS Employer (MM/DD/YY): \_\_\_\_\_

I never worked for a WRS employer prior to July 1, 2011.

I worked for a WRS employer(s) prior to July 1, 2011.

- The name of the WRS employer(s) is: \_\_\_\_\_

- I worked for the WRS employer(s) from \_\_\_\_\_ (MM/DD/YY) to \_\_\_\_\_ (MM/DD/YY). *Attached is the required documentation of proof that I have worked for a WRS employer prior to July 1, 2011 such as a paystub, letter from the former employer, W-2, etc.*

- The documentation must be submitted to your payroll/benefit representative within 30 days from your employment start date. **If no documentation is submitted within 30 days, then there will be no certification of prior WRS service, and your WRS eligibility will be determined under Act 32.**

*To the best of my knowledge, all statements and answers on this form are complete and true.*

Employee Signature: \_\_\_\_\_

Date Signed (MM/DD/YY): \_\_\_\_\_

Employer Representative: \_\_\_\_\_

Employer Received Date (MM/DD/YY): \_\_\_\_\_