

Request for Service Credit Cost Information — Military Service

888 CalPERS (or 888-225-7377) • TTY: (877) 249-7442

	Name of Member (Last Name, First Name, Middle Initial)	Social	Security Number of Calpers ID
Section 1	About You		
If we have provided cost information to you in the past for this service credit,	Commer Name (if applicable) Daytime Phone		
check the Yes box and	Mailing Address		
indicate the date your request was submitted.	City	State ZIP Code	Current Employer
If you have submitted a	Have you requested this cost information before? No Yes Requested Date (mm/dd/yyyy)		
retirement application, check the Yes box and	Have you submitted a retirement application? No Yes Retirement Date (mm/dd/yyyy) Were you employed by a CalPERS-covered employer and granted a leave of absence to enter the military? No Yes Employer Are you a member of a public retirement system in California other than CalPERS? No Yes		
indicate your planned			
retirement date.			
If you were employed by a CalPERS-covered employer			
and were granted a leave of absence to enter the military, check the Yes	Name of System Is the military service being requested already credited in another retirement system? ☐ No ☐ Yes		
box and indicate your employer's name.	Name of System		
Section 2	Military Active Duty Service Dates (atta	ach certification)	
List your active duty	Armed Forces Branch	 Enlistment Date (mm/dd/yyyy)	 Discharge Date (mm/dd/yyyy)
military service dates from your Military Certification.			
	Armed Forces Branch	Enlistment Date (mm/dd/yyyy)	Discharge Date (mm/dd/yyyy)
	Armed Forces Branch	Enlistment Date (mm/dd/yyyy)	Discharge Date (mm/dd/yyyy)
Section 3	Member Certification		
Sign and date the	I hereby certify that the above information is true and correct.		
request form. Make a copy for your records.	L Member Signature	Date (mm/dd/yyyy)	
Attach a copy of your military discharge or leave of absence documents (i.e., DD-214). Also attach a copy of your cost estimate from the Service Credit Cost Estimator at www.calpers.ca.gov/servicecreditestimator.			

Mail to:

CalPERS Member Account Management Division • P.O. Box 4000, Sacramento, California 95812-4000

Privacy Notice

The privacy of personal information is of the utmost importance to CalPERS. The following information is provided to you in compliance with the Information Practices Act of 1977 and the Federal Privacy Act of 1974.

Information Purpose

The information requested is collected pursuant to the Government Code (sections 20000 et seq.) and will be used for administration of Board duties under the Retirement Law, the Social Security Act, and the Public Employees' Medical and Hospital Care Act, as the case may be. Submission of the requested information is mandatory. Failure to comply may result in CalPERS being unable to perform its functions regarding your status.

Please do not include information that is not requested.

Social Security Numbers

Social Security numbers are collected on a mandatory and voluntary basis. If this is CalPERS' first request for disclosure of your Social Security number, then disclosure is mandatory. If your Social Security number has already been provided, disclosure is voluntary. Due to the use of Social Security numbers by other agencies for identification purposes, we may be unable to verify eligibility for benefits without the number.

Social Security numbers are used for the following purposes:

- 1. Enrollee identification
- 2. Payroll deduction/state contributions
- Billing of contracting agencies for employee/ employer contributions
- 4. Reports to CalPERS and other state agencies
- 5. Coordination of benefits among carriers
- 6. Resolving member appeals, complaints, or grievances with health plan carriers

Information Disclosure

Portions of this information may be transferred to other state agencies (such as your employer), physicians, and insurance carriers, but only in strict accordance with current statutes regarding confidentiality.

Your Rights

You have the right to review your membership files maintained by the System. For questions about this notice, our Privacy Policy, or your rights, please write to the CalPERS Privacy Officer at 400 Q Street, Sacramento, CA 95811 or call us at 888 CalPERS (or 888-225-7377).

