



**STRS REQUIRED QUESTIONNAIRE**  
 CCCCDC PAYROLL OFFICE  
 STRS/PERS INFORMATION SUPPLEMENTAL  
 CERTIFICATED/CLASSIFIED (MONTHLY AND HOURLY)

<b>Are you a current member of:</b>	<b>Yes</b>	<b>No</b>
<b>Public Employees' Retirement System (PERS)?</b>		

Employer:	Full-time	<input type="checkbox"/>	Part-time	<input type="checkbox"/>	
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<b>State Teachers' Retirement System (STRS-Defined Benefit Program)?</b>			
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Employer:	Full-time	<input type="checkbox"/>	Part-time	<input type="checkbox"/>	
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<b>State Teachers' Retirement System (STRS – Cash Balance Program)?</b>			
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Employer:	Full-time	<input type="checkbox"/>	Part-time	<input type="checkbox"/>	
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<b>Were you a member of the Public Employees' or State Teachers' Retirement System under any previous employment?</b>			
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<b>Did you withdraw funds?</b>			
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Employer:	PERS	<input type="checkbox"/>	STRS	<input type="checkbox"/>	
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<b>Are you currently on leave without pay from another public agency, school or community college?</b>			
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Employer:	
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Leave Period From:	To:
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<b>Are you a member of a retirement system other than the Public Employees' Retirement System or the California State Teachers' Retirement System?</b>			
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Employer:	System:
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<b>Are you a retired member of:</b>			
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<b>Public Employees' Retirement System?</b>			
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Retirement Date:	Employer:
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<b>State Teachers' Retirement System?</b>			
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Retirement Date:	Employer:
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Name (Print)	Social Security Number
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Signature	Date
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