

SCHOOL ADMINISTRATIVE UNIT 50
48 POST ROAD, GREENLAND, NH 03840

GREENLAND SCHOOL DISTRICT * NEW CASTLE SCHOOL DISTRICT
NEWINGTON SCHOOL DISTRICT * RYE SCHOOL DISTRICT

Attestation of Eligibility for NH Retirement System Pension Benefits

If you are a retiree through the NH Retirement System, it is important that you contact NHRS before accepting any employment with SAU 50. House Bill 561 limits NHRS retirees who begin working part-time (including substitutes) for retirement system participating employers after January 1, 2019, to a maximum **TOTAL** (not just SAU 50) of **1,352** hours worked per calendar year. The law contains a “grandfathering” provision that allows retirees already working part-time (including substitutes) for retirement system participating employers to work a maximum **TOTAL** (not just SAU 50) of **1,664** hours per calendar year as long as they remain in the same position they held on the effective date of the bill. As an employer we are required to submit a record of all hours worked to NHRS.

Separation from service: Members who retire on/after January 1, 2019, must wait at least 28 days from their effective date of retirement before commencing part-time employment with a participating employer. Note: The effective date of retirement is always the first of the month.

Penalty for violating statute: A retiree who exceeds the maximum permitted hours will forfeit the state annuity portion of his or her retirement allowance, and any allocable cost of living adjustments, with the forfeiture commencing as soon as administratively feasible in the next calendar year and continuing for 12 months.

This document is not all inclusive and you should contact NHRS at 603-410-3500 for further details.

SECTION I – NHRS BENEFIT STATUS *(CHOOSE ALL THAT APPLY)*

- _____ I am a retiree currently in receipt of an NHRS pension benefit.
- _____ I am not in receipt of an NHRS pension benefit and am not eligible to receive an NHRS pension benefit at a future date.
- _____ I am not in receipt of an NHRS pension benefit, but am eligible for a future benefit under vested deferred retirement.

SECTION II – EMPLOYEE SECTION

Name _____
Address _____
Signature _____ Date ____/____/____
Last Four Digits Social Security # _____

SECTION III – EMPLOYER SECTION

Employer Name _____ Position _____
Date of Hire ____/____/____ Position is Part-time Full-time

Note to Employees: Beneficiaries of an NHRS survivorship pension are not considered “retirees.”

Note to Employers: Keep this form for your records; do not submit to NHRS.