



SCHOOL EMPLOYEES RETIREMENT SYSTEM OF OHIO

300 E. BROAD ST., SUITE 100 • COLUMBUS, OHIO 43215-3746
614-222-5853 • Toll-Free 800-878-5853 • www.ohsers.org

CERTIFICATION OF SCHOOL SERVICE

Name: _____ Member ID: _____

Current Address: _____

I hereby give my consent to release information regarding my personal work history record to School Employees Retirement System of Ohio.

Signature: _____ Date: _____

The above individual has applied for Ohio valued retirement credit for school service. Your certification must be verified from a legitimate source of documentation, such as payroll or retirement records of the state, municipality, institution, or school. Certify only the school service that meets the following qualification: service in a public or private school, college, university chartered or accredited by the appropriate governmental agency, or a school operated by, or for the U.S. Government.

| Name of Employer | Location of employing unit (City, or Township, County, and State of Country) | Use one line for each school year, July 1 through June 30 | | | | | | No. of months worked if before July 1977 | No. of days worked if after July 1977 |
|------------------|--|---|-----|-----|-----|-----|-----|--|---------------------------------------|
| | | From | | | To | | | | |
| | | Mo | Day | Yr. | Mo. | Day | Yr. | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| 4. | | | | | | | | | |
| 5. | | | | | | | | | |

Is the applicant entitled to a benefit for any of the above service, other than Social Security?

Yes No

By what governmental agency is this institution chartered or accredited? _____

I certify that according to the records I have examined, the above statements are correct and the applicant was employed as a _____
Job classification

Signature: _____
(Fiscal, Payroll, or other officer) Title

Office: _____
Name of Educational Institution

Office Address: _____
Street City State and Zip Code

Phone Number: _____ Date: _____