## The University of Texas System VESTING/TERMINATION STATUS FORM

Name:		Social Security Number:		
The U	niversi	ty of Texas	<u>-</u>	
	Emplo apply)	mployee terminated from employment effective and was participating in (check any that oply):		
			OCP)	
For OF	RP Purp	poses Only		
	Employee is employed and has met the Optional Retirement Program (ORP) vesting requirement.			
	0	Final ORP deposit (or adjustment) in the amount which will be/was sent to yo Employee's account must not be made until this	ı on Final disposition of	
	0	Has employee vested? Yes No		
	ORP E	Employer contributions should be refunded Yes	_ No	
	0	Amount to be refunded \$		
		19 Texas Administrative Code Sections 25.6(a)(11 forfeited ORP Employer contributions within 30 d	) and 25.6(f)(2), you are hereby requested to return ays of receiving this request.]	
		All ORP Employer contributions should be maile	ed to:	
Comm	ents:			
Name	(Print):			
Authorized Signature			Date	

Notice about Social Security Numbers

Federal law requires The University of Texas System to report income and SSN's for all employees to whom compensation is paid. Employee SSNs are maintained and used by The University of Texas System for payroll and benefits purposes and are reported to Federal and State agencies on forms required by law for benefits purposes. Further disclosure of the employee's social security number will be governed by the Public Information Act (Chapter 552 of the Texas Government Code).