

Date

**THE CITY UNIVERSITY OF NEW YORK EMPLOYMENT APPLICATION - PART THREE**

**CERTIFICATION OF NEW YORK STATE OR NEW YORK CITY PUBLIC SERVICE  
CERTIFICATION OF COLLECTION OF PUBLIC PENSION FUNDS**

**Under the New York State Retirement and Social Security Law, retirees collecting a pension from New York State or New York City cannot (with certain exceptions) work at the University and continue to collect their pension. Accordingly, The City University of New York requires individuals seeking University employment to disclose their public employment and pension plan history for the purpose of establishing eligibility for employment. An employee who fails to disclose such information will be subject to appropriate action, which may include disciplinary action to terminate their employment and/or suspension or diminution of the retiree's public pension benefits.**

**Note:** Retirees who are under age 65 and are collecting a pension may receive an annual income of up to \$30,000 (Thirty thousand only) in a position in public employment without diminution of their pension benefits.

1. Candidates for employment must submit this form at the time of hire, prior to any appointment
2. All full-time and part-time employees are responsible for submitting this form, should their status change
3. Adjuncts must submit this form every semester in which their employment continues

Last Name  First Name  Middle Initial

College  Department

Contract Title   Full-time  Part-time

**Current positions in Public Service** (Please check appropriate box)

- I am **not** currently working for another public service agency, organization, or jurisdiction funded by New York City or New York State, nor have I worked at any such entity during the calendar year
- I am **now** working for another public service agency, organization, or jurisdiction funded by New York City or New York State  
Name of Employer
- I am a statewide elected official of New York State
- I am a member of the New York State Legislature
- I am a New York State Legislative employee
- I am a New York State officer or employee (other than CUNY employee) and I receive compensation other than on a per diem basis

**Prior positions in Public Service** (Please check appropriate box)

- I have **no prior** service with a public service agency, organization or jurisdiction funded by New York City or New York State
- I am **former** employee of  of the City/State of New York, and  
 I **am collecting** a retirement benefit from a public pension system (including ORP) maintained by the State or City of New York  
Name of Pension Plan
- I **am not** collecting retirement benefit based upon this public service

**I hereby attest that the information I have provided above is correct to the best of my knowledge.**

Signature  Date

**Office of Human Resources**

Name  Signature  Date