



## CalPERS Retirement Analysis

### Information Data Sheet (Please Print)

Retiree's Name: \_\_\_\_\_

Retiree's Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Retiree's Email Address: \_\_\_\_\_

Retiree's Telephone Number (with area code): \_\_\_\_\_

Retiree's Sex: \_\_\_\_\_

Retiree's Date of Birth (Month/Day/Year): \_\_\_\_\_

Date of Employment (Month/Day/Year): \_\_\_\_\_

Most Likely Date of Retirement (Month/Day/Year): \_\_\_\_\_

Sick Leave (Enter Y for maximum sick leave credit, N for no sick leave credit, or an estimate of the credited sick leave hours you will have at retirement): \_\_\_\_\_

System (Enter Q for quarter, S for semester): \_\_\_\_\_

Full-Year Sabbaticals (enter the number of full-year sabbaticals you have been awarded): \_\_\_\_\_

Difference-In-Pay Leaves (enter the number of quarters or semesters of difference-in-pay leave that you have been awarded: \_\_\_\_\_ Do you intend to FERP (Y/N)? \_\_\_\_\_\*)

Retiree's Monthly Gross Salary: \_\_\_\_\_

(Note: the CalPERS retirement benefit is determined from your highest 12-month average salary, enter that number if it is different than your current gross monthly salary.)

Beneficiary's Name: \_\_\_\_\_

Beneficiary's Date of Birth (Month/Day/Year): \_\_\_\_\_

If beneficiary is not your spouse or registered domestic partner, check here: \_\_\_\_\_

Please mail your completed form to: H. Rutemiller  
Department of Information Systems/Decision Sciences  
California State University, Fullerton  
P.O. Box 6848  
Fullerton, CA 92834-6848  
or Fax to (657) 278-5940.

(\*Administrators with retreat rights should indicate expected monthly FERP salary (annualized).)

*This service is provided free of charge by CSU-ERFA. We hope you will consider joining CSU-ERFA upon your retirement.*