



Application to Make Furlough Contributions (7/1/2015-6/30/2017)

Please submit this **Application to Make Furlough Contributions** only if you wish to request the cost to make up missed contributions for furlough days taken from a SURS-covered employer during the period July 1, 2015 through June 30, 2017. **The employer must fill out Part 2.** SURS must receive this Application by **December 30, 2018**. Accordingly, this form should be provided to the employer as early as possible to ensure forwarding to SURS by the deadline. Upon receipt of this completed form, SURS will provide cost information in accordance with 40 ILCS 5/15-113.11(b).

PART 1 – EMPLOYEE SECTION (To be completed by the employee and forwarded to the employer to complete Part 2.)

I, _____, hereby apply to make contributions for furlough days I have taken during the <small>Print Name Here</small> <small>period July 1, 2015, through June 30, 2017, as permitted under 40 ILCS 5/15-113.11(b).</small>		
Total number of furlough days taken for this employer: _____ Days		
Number of days you wish to have included in cost information: _____ Days		
xxx-xx-_____ <small>Last four of S.S. #</small>	_____ <small>Employee Signature</small>	_____ <small>Date</small>

PART 2 – EMPLOYER SECTION (To be completed by the employer's payroll or human resources personnel and returned to SURS.)

On the basis of official records, I, the undersigned, certify that the individual identified on this form was placed on the following voluntary or involuntary period(s) of furlough and that the individual forfeited earnings that would otherwise have been paid for the period(s) but for the furlough, as documented below. I acknowledge that SURS must be informed immediately if reimbursement for furlough is paid and SURS contributions are deducted from the reimbursement.

Name of Employer Name of Certifying Official Signature of Certifying Official Date

List the voluntary or involuntary furlough periods between July 1, 2015 and June 30, 2017, **already taken** by the employee and the corresponding earnings information. Non-consecutive periods of furlough should be listed as separate entries.

Furlough Begin Date	Furlough End Date	Monthly Rate at Start of Period	# Months Worked	# Months Paid	Forfeited Furlough Earnings	Percent Time on Furlough for Period

Additional pages may be attached as needed. This completed application and any supporting documentation must be postmarked and mailed or faxed to SURS by **December 30, 2018**.