

CERTIFICATION OF ELIGIBILITY FOR CRITICAL SHORTAGE TEACHERS AND ADMINISTRATORS

VIRGINIA RETIREMENT SYSTEM
P.O. Box 2500
Richmond, Virginia 23218-2500
Toll Free 1-888-VARETIR (827-3847)
Fax 804-786-9718
www.varetire.org

1. Employer Code
2. Employer (School Division) Name

Retirees of the Virginia Retirement System (VRS) employed in critical shortage positions as defined by the Superintendent of Public Instruction must complete this form at the time of employment and by November 1 of each year as long as they continue to be employed in a critical shortage position. The employer must certify the form and send it to VRS.

3. Name (First) (MI) (Last) (Jr./Sr.)			4. Social Security Number	
5. VRS Retirement Date	6. Employer at Time of Retirement	7. Teaching License Number and Expiration Date No: _____ Exp: _____		
8. Post Retirement Employment Information Enter information about all positions you have held with VRS-participating employers since your VRS retirement date:				
<u>Employer</u>	<u>Dates Employed</u> <u>From</u> _____ <u>To</u> _____		<u>Employment Status</u> <input type="checkbox"/> Substitute/Part-time <input type="checkbox"/> Full-time	
_____	_____		<input type="checkbox"/> Yes <input type="checkbox"/> No	
_____	_____		<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Current Critical Shortage Position Information				
School: _____			Hire Date: _____	
Assignment: _____			Annual Contract Salary: \$ _____	
10. Retiree Certification				
I certify that the information on this form is accurate. I understand that falsification of this information could result in the loss of VRS retirement benefits during my time of employment with the named school board. I have read the following statements and meet the following requirements:				
<ul style="list-style-type: none"> • I am neither receiving nor eligible to receive a future benefit from any program that provides an incentive for early retirement before being eligible for unreduced retirement benefits from VRS; and I have not retired from VRS under the Transitional Benefits Program. • I have had a complete break in service from all VRS employers for at least 12 consecutive months. • Prior to my VRS retirement date, I had no pre-arranged employment commitment, either verbal or written, with this school division. • I am licensed and endorsed in my area of assignment by the Virginia Board of Education. • I have been assigned to work in a critical shortage position as defined by the <u>Code of Virginia</u> and the Department of Education. I understand this position is contingent on it being identified as a critical shortage position and that it may not qualify as a critical shortage position as defined by the <u>Code of Virginia</u> and the Department of Education beyond the current school year. 				
Retiree Signature _____				Date _____
11. Employer Certification				
I certify this individual will work in a critical shortage position as defined by the <u>Code of Virginia</u> and the Department of Education or three or fewer qualified applicants applied for this position. This position may not qualify as a critical shortage position as defined by the <u>Code of Virginia</u> and the Department of Education beyond the current school year. I further certify the individual is licensed and endorsed for this position and that I did not make a pre-employment commitment, either verbal or written, to this individual prior to his or her VRS retirement date.				
School Division Superintendent or Designee Signature _____				Date _____
School Division Superintendent or Designee Printed Name _____				



COMPLETING THE CERTIFICATION OF ELIGIBILITY FOR CRITICAL SHORTAGE TEACHERS AND ADMINISTRATORS

Virginia Retirement System (VRS) retirees who are licensed to teach in Virginia may teach full-time in a critical shortage position and continue to receive VRS retirement benefits if certain eligibility requirements are met. After you complete this form, submit it to your employer for certification. Your employer must send the form to VRS at the time you are initially hired and each year thereafter by November 1.

To be eligible:

- You must be receiving a monthly VRS retirement benefit;
- You must teach in a designated critical shortage position as defined by the Code of Virginia and Department of Education;
- You must have had a bona fide break in service of at least 12 months following the effective date of your VRS retirement and not worked in any capacity for a VRS-participating employer, even on a part-time/substitute basis during that period;
- You must not have retired under a local school division's early retirement incentive program (ERIP), unless you are receiving an unreduced VRS retirement benefit. (Any period of work performed by the retiree to satisfy the requirements of an ERIP will extend the number of months required to satisfy the bona fide break in service to comply with this program.);
- You must not have retired under the Transitional Benefits Program with an enhanced monthly VRS benefit.
- You must be licensed and endorsed for your assigned position by the Virginia Board of Education; and
- Prior to your VRS retirement date, you did not have a pre-arranged commitment, either verbal or written, for post-retirement employment as a critical shortage teacher or administrator.

Retiree Responsibilities

When completing the form:

- In Box 6, enter the name of the employer or school division for whom you worked at the time of your VRS retirement.
- In Box 7, enter your Virginia teaching license number and its expiration date.
- In Box 8, enter information about all positions you have held with VRS-participating employers since your retirement. (Additional employment history may be provided on a separate page if needed.)
- In Box 9, enter information about the critical shortage position you are filling. This includes the name of the school at which you are working for the school division identified in Boxes 1 and 2, the date you were hired for the position, the assignment you have been given, and your annual contract salary.
- After completing the form, carefully read the certification statements in Box 10, sign and date the form.
- After you have signed and dated the form, submit the form to your employer for certification.

Employer Responsibilities

- Verify the information entered by the retiree in Box 9.
- Read the employer certification statement, sign and date as indicated in Box 11.
- After completing the certification, send the form to VRS.