STATE TEACHERS
RETIREMENT SYSTEM
OF OHIO

275 East Broad Street
Columbus, OH 43215-3771
1-888-535-4050
www.strsoh.org/employer

EXEMPTION FROM CONTRIBUTIONS FOR STUDENT EMPLOYEES

Members employed as teachers on a part-time basis by a school, college or university in which they are regularly attending classes may apply for exemption from contributions to STRS Ohio. Application for exemption must be made within 30 days of employment following each period of nonexempt employment. The exemption will remain in effect until employment as a student employee terminates or contributions are made on compensation paid by the same employer, whichever occurs earlier. **Contributions are required during any period of employment during which the teacher is not attending classes.** A new exemption form must be filed for any subsequent teaching service as a student employee.

This exemption is applicable only to student employees who are currently members of STRS Ohio. Student employees who have not previously contributed to STRS Ohio are automatically denied membership and this exemption form is not required.

Teachers on leave of absence from other teaching positions covered by STRS Ohio are not eligible for exemption from contributions.

No service credit will be awarded for any period for which a member is exempt from contributions. Service credit for the exempt service may be purchased only as provided by Section 3307.73, Revised Code.

Exemption Declaration

I hereby request exemption from contributions to STRS Ohio as a part-time teacher in a school, college or university where I am regularly attending classes. I understand that no service credit will be awarded for periods covered by this exemption and that I must contribute during any periods that I am not attending classes.

I am not currently on leave of absence from another teaching position covered by STRS Ohio.

Student employee name _____
First Middle Last

Student employee signature _____

Social Security number _____ Date _____

Home address _____
Street City State ZIP code

Employer Certification

The employer joins in this request for exemption from contributions to STRS Ohio for the student employee named above. Contributions will be remitted for any period in which the employee is not attending classes.

Certified by _____ Title _____

Signature _____ Date _____

Employer name _____ Four digit employer no. _____