



FOOTHILL-DE ANZA
COMMUNITY COLLEGE DISTRICT

PUBLIC AGENCY RETIREMENT SYSTEM (PARS)

WITHDRAWAL REQUEST

PLEASE ACCEPT THIS REQUEST TO WITHDRAW MY (PARS) CONTRIBUTION:

(NAME)

(Employee ID#)

(ADDRESS)

(BIRTH DATE)

(CITY)

(STATE)

(ZIP CODE)

(TELEPHONE #)

REASON FOR WITHDRAWAL:

_____ No longer working at Foothill-De Anza (resigned, terminated, relocated)
Note: Re-employment preference is lost when employee terminates or resigns.

_____ Covered by another retirement system within our District (STRS/FICA/PERS)
Note: Two year in-service waiting period for distribution of funds.

_____ Retirement (STRS) - date of retirement was _____

_____ Other (Please explain) _____

(EMPLOYEE SIGNATURE)

(DATE)

Please return this completed request form to: (check one)

- _____ Human Resources at **hr@fhda.edu** or **(650) 949-7454**
Foothill College 12345 El Monte Rd., Los Altos Hills, CA 94022
- _____ Human Resources at **hr@fhda.edu** or **(408) 864-8260**
De Anza College 21250 Stevens Creek Blvd., Cupertino, CA 95014

- ___ Terminated
- ___ Retirement from STRS
- ___ Other

(Date Updated)

(Campus Personnel Signature)