

# FLORIDA RETIREMENT SYSTEM

## ENROLLMENT PROCESS WORKSHEET

**THIS DOCUMENT, AND ALL REQUESTED INFORMATION, MUST BE COMPLETED  
AND RETURNED PRIOR TO JOINING.**

### GENERAL INFORMATION

_____	Current Retirement Plan	Please include, in a cover letter, explaining what will become of your current retirement plan(s). If you do not have a current retirement plan initial here _____
_____	Certified Financial Statement per Chapter 121.051(2)(b)1, if applicable	This document was used to create your organization.
_____	List of current employees	
_____	Establishing Document	
_____	Federal Identification Number	_____
_____	Contact Information	
	Person responsible for reporting:	_____
	Address:	_____ _____
	Telephone Number:	_____
	Fax Number:	_____
	Email Address:	_____

I, \_\_\_\_\_, certify that the above information is  
accurate.  
print name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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Children's Trust of Alachua County