San Bernardino County Superintendent of Schools

Transforming lives through education

Ted Alejandre
County Superintendent

San Bernardino County Superintendent of Schools
DISTRICT FINANCIAL SERVICES

DISTRICT CERTIFICATION OF CALPERS RETIREMENT APPLICATIONS

(FORMERLY CALPERS FORM BSD-200 AND BSD-200A)

SCHOOL DISTRICT: _____

MEMBER NAME: _____

SOCIAL SECURITY NUMBER: XXX-XX- _____

RETIREMENT DATE: _____

EMPLOYEE'S LAST **DAY** IN PAID STATUS (NOT PAYROLL DATE): _____

EMPLOYEE'S SEPARATION DATE: _____

BALANCE OF UNUSED SICK LEAVE HOURS: _____

BALANCE OF UNUSED SICK LEAVE DAYS (HOUR ÷ 8): _____
(ex: 493 hours ÷ 8 = 61.630 days (round to third decimal place)

SIGNATURE: _____ DATE: _____

PRINTED NAME: _____

TITLE: _____

PHONE NUMBER: _____

FOR DFS USE	
DATE ENTERED INTO MYCALPERS	**INITIALS**