

Public Employees' Retirement System of Nevada693 W. Nye Lane, Carson City, NV 89703 (775) 687-4200 Fax (775) 687-5131
5740 S. Eastern Ave., Suite 120, Las Vegas, NV 89119 (702) 486-3900 Fax (702) 678-6934
Toll Free 1-866-473-7768 Website www.nvpers.org

STUDENT CERTIFICATION FORM

complete Section II, we will accept a letter from your indicating your full-time enrollment. This information me the above address. Your Student Certification Form must to maintain the continuous payment of your student benefit	school or a printout from ust be attached to the Student be received in our officer.	m the National Student Clearinghouse dent Certification Form and returned to
SECTION I: COMPLETED BY STUDENT		
I hereby certify I am an unmarried student attending scholemployees' Retirement System immediately if my status and submit proof of my full-time student status will result of all benefits paid retroactively to the end of the last seme will stop as of the first of the month following my marriatime student.	changes to less than full- t in my benefit being stop ester attended as a full-tim	time. I understand that failure to enroll pped and will require the reimbursement ne student. I also understand my benefit
Student Signature	Date	()
SECTION II: COMPLETED BY SCHOOL		
Student Name:	Last Four Digits of SSN:	
I certify that the above student is or has been enrolled in the	his school during the scho	ool year listed below:
Semester: to En	Number of Credits:	
The number of credits per semester which constitutes full-		
Signature of School Representative		Date
Name of School: Address:		
Phone Number: ()_		
	RS Use Only ate Received	