



UNIVERSITY OF CALIFORNIA
PERMANENT INTERLOCATION TRANSFER
TERMINATING LOCATION - EMPLOYEE DATA SHEET
UFIN 301 (R03/16)

TRANSFERRING		FROM:				TO:				EFFECTIVE DATE:													
EMPLOYEE NAME (LAST, FIRST, MI)						SOCIAL SECURITY NUMBER				BIRTH DATE		Sex <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/>											
LAST PAY DATE		ORIGINAL HIRE DATE		HIRE DATE		OATH DATE		I-9 DATE		VAC HRS		SICK HRS		AS OF									
8233 EXP DATE		COUNTRY OF RES		CIT		VISA		EAD		RET SYS		OASDI/MED		PRIOR SERV MOS		SERV CR MOS		BEN HRS					
OASDI COVERED GROSS*								CAREER HOURS				SECONDARY BELI STATUS QUALIFICATION CODE											
MEDICARE COVERED GROSS*								TRANSFERRING OASDI/MED LIABILITY TO NEW LOCATION Yes <input type="checkbox"/> No <input type="checkbox"/> IF NO, PROVIDE REASON:															
RET. COVERED GROSS																							
SAFE HARBOR GROSS																							
UCRP FISCAL YTD COV. COMP																							
COVERED COMP. LIMIT CODE				<input type="checkbox"/> G <input type="checkbox"/> N																			
ENROLLED BENEFITS		MCB CUR/NXT \$ /										ENROLLED DEPENDENT INFORMATION											
MEDICAL		PLAN NAME		COV CODE		COVERED THROUGH **		NAME		DOB		RELATION		SSN		M		D		V		L	
DENTAL		<input type="checkbox"/> D1 <input type="checkbox"/> D3		COV CODE		COVERED THROUGH **																	
VISION		PLAN NAME		COV CODE		COVERED THROUGH **																	
LEGAL		PLAN NAME		COV CODE		COVERED THROUGH **																	
STATE DOMESTIC PARTNERS FORM		<input type="checkbox"/> YES <input type="checkbox"/> NO		COV CODE		COVERED THROUGH **																	
SUPPLEMENTAL LIFE		PLAN CODE		ANNUAL SALARY		EFFECTIVE DATE ***		OTHER DEDUCTIONS ****															
DEPENDENT LIFE		PLAN CODE		ANNUAL SALARY		EFFECTIVE DATE ***																	
SUPPLEMENTAL DISABILITY		WAITING PERIOD		MO SALARY		EFFECTIVE DATE ***																	
AD&D		COVERAGE CODE		PRIN SUM		EFFECTIVE DATE ***																	
DEPCARE FSA		ANNUAL AMT		DECLINING BAL		SPECIAL COMMENTS																	
		MONTHLY AMT		YTD AMT																			
		EFF DATE		TERM DATE																			
HEALTH FSA		ANNUAL AMT		DECLINING BAL																			
		MONTHLY AMT		YTD AMT																			
		EFF DATE		TERM DATE																			
HEALTH HSA		MONTHLY AMT																					
403(B) MAC GTN 008 ****						457(B) MAC GTN 398 ****						PREPARED BY: EMAIL ADDRESS: PHONE: DATE:											
UCRP BUYBACK GTN 029		<input type="checkbox"/>		DED AMT		DECLINING BAL																	
403(B) ST LOAN		<input type="checkbox"/>		DED AMT		DECLINING BAL																	
403(B) LT LOAN		<input type="checkbox"/>		DED AMT		DECLINING BAL																	

* IF TRANSFERRING TO LBL OR HASTINGS, FICA GROSSES RESTART.
** DATE COVERAGE ENDS AT "TRANSFERRING FROM" LOCATION.
*** THE TERMINATING LOCATION SHOULD PROVIDE THE EFFECTIVE DATE FOUND ON THE IINS SCREEN.
**** AFTER TAX, UNION DUES, SALARY ATTACHMENTS, TAX LEVIES, OTHER STATE TAX (ATTACH UPAY 830).

Instructions for Completion of UFIN 301: Permanent Interlocation Transfer

To ensure vacation and sick leave balances, UCRP service credit, retirement savings program and other benefits information transfer properly, the UFIN 301 should be prepared in a timely manner. Locations may wish to complete the non-shaded fields and forward to the receiving location. The solid shaded fields can be completed once the final payment has posted and all final balances are known. Benefit representatives at both locations should coordinate and work closely with each other and the employee. Transferring employees do not have a PIE as a result of the transfer; in general, current benefits continue at the new location. Any changes are normally done at the next Open Enrollment.

Definitions:

Last Pay Date: Enter the last date for which the employee will be paid on the transferring (separating) campus

Original Hire Date: Should reflect the first date of employment with the University of California. This date can be obtained from the EPER screen in PPS.

Hire date: If the personnel action was a transfer (without a break in service) from another UC campus, the hire date should reflect ***the most recent date of continuous employment with the University of California. An incorrect date may have retirement derivation implications.***

Both the original hire date and the date of hire must be completed. In most cases, they will be the same date. However, if there has been a break in service, the hire date would be different from the original hire date.

➤ **Example 1:** employee A starts at the Irvine campus on 1/1/2005. This is the **original date of hire**. Then on 2/9/14 employee leaves Irvine and on 2/10/14 starts at Riverside. Because there has been no break in service, the **hire date** at the Riverside Campus should be **1/1/2005**.

➤ **Example 2:** employee A originally started at Irvine on 1/1/2005. This is entered as the **original date of hire**. On 2/9/14, employee A terminates employment with the Irvine campus. On 4/1/14, employee A is hired at Riverside. The employee was hired after the 1st day of the second month. 4/1/14 is entered as the **"hire date"** and the employee is in the new retirement tier.

Note: In example 2 above, because the employee was not rehired by the 1st day of the second month after separation date, they are in the 2013 retirement tier. However, had the employee been rehired on 3/31/14 at Riverside, then they would have had 3/31/14 as the "hire date" and they would remain in the 1976 retirement tier.

Country of Res: Enter the country of residence (IALN).

Ret Sys: Enter 'U' for UCRP (1976 tier), 'W' for UCRP (2013 tier), 'H' for Safe Harbor, 'B' for two tier or 'N' for not contributing (IGEN)

OASDI/Med: Enter 'E' for OASDI and Medicare, 'M' for Medicare Only and 'N' for not contributing to either OASDI or Medicare (IGEN)

Prior Serv: Enter prior service months (IPER)

Serv Cr: Enter service credit from date (IHR2)

Ben Hrs: Enter hours towards benefits eligibility (IHR2)

Secondary BELI Status Qualification Code: Enter 52 (EPER)

Career Hrs: Enter hours towards career eligibility (IHR2)

EAD: employment authorization document authorizes an alien to work in the U.S. for a period of time.

8233 Exp Date: refers to the tax treaty document and expiration of tax treaty benefits for a foreign national.

Citizenship code: Captured to assist in the determination of tax residency for tax withholding purposes only and should not be used for any other purpose.

Visa: Used for determining the tax residency for tax withholding.

I-9 Form: A copy of the original is transmitted with the UFIN301. If the receiving location notices the I-9 is incomplete or deficient it is advisable to take steps to correct the form.

OATH Date: Date the State Oath was signed or an amended version re-signed.

Things that should be done to assist the employee: The benefits representative or the responsible person should advise the employee of the benefits and accruals that will be transferred. It is the transferring campus administrator's responsibility to complete the Interlocation Transfer form (UFIN301) and to transmit it securely to the receiving campus.

Medical & Dental Benefits: Employees terminating at sending campus with IT reason code will have coverage through the month following the separation month. The receiving campus should verify that the employee can continue in the same medical plan since availability can vary by location. If the employee's plan is not available in their new location, the employee may enroll in a new plan. If the employee is enrolled in a medical plan with a service area and/or DeltaCare USA, the employee may need to change the primary care physician and/or dentist. The employee may receive a COBRA packet for continuing health benefits. You can inform the employee to disregard that information since benefits should continue at the new location.

Flexible Spending Accounts (FSA, Health and DepCare): When an employee transfers to a new UC location, participation in the flexible spending account plans remain at the same contribution level. If any monthly contributions were missed due to payroll deadlines, the new location must make a retroactive adjustment so that coverage and contributions are continuous. The transferring campus should delete the FSA end date on the ERET screen to ensure that the spending card is not disabled as a result of the separation date being transmitted to Conexus.

Health Savings Account (HSA): Assume the employer contribution to HSA has already been made by the sending campus. Only the employee monthly deduction needs to be established at the receiving campus. Employees are allowed to change their monthly deduction at any time.

403(b) and 457(b) Plans: If the employee is contributing to the 403(b), the 457(b) or the DC After-Tax plans, the employee will need to redo the contribution election for the new location. Refer the employee to Fidelity Retirement Services (netbenefits.com or 866-682-7787). Deferral elections are subject to payroll deadlines so contributions may be missed. Maximum annual contribution information should be transmitted from the departing campus to the receiving campus to assure that the employee does not inadvertently over-contribute to the tax-deferred savings plans. Hiring campuses should pay attention to, compare, and overwrite (when necessary) the assigned MAC on the ECEN screen in situations where the transferring employee will be 50 years or over as of the end of the calendar year of original hire. To ensure that any existing 403(b) loan repayments continue, coordination with the departing campus and/or Fidelity Retirement Services may be necessary.

➤ **It is recommended to attach the final pay advice to verify HSA, FSA, DepCare, etc. as well as relevant screen shots from PPS to support the entries.**

For further information see Accounting Manual Chapter on Interlocation Transfers: <http://policy.ucop.edu/doc/3410266/AM-P196-38>

PRIVACY NOTIFICATIONS

STATE

The State of California Information Practices Act of 1977 (effective July 1, 1978) requires the University to provide the following information to individuals who are asked to supply information about themselves.

The principal purpose for requesting information on this form, including your Social Security number, is to verify your identity, and/or for benefits administration, and/or for federal and state income tax reporting. University policy and state and federal statutes authorize the maintenance of this information.

Furnishing all information requested on this form is mandatory. Failure to provide such information will delay or may even prevent completion of the action for which the form is being filled out. Information furnished on this form may be transmitted to the federal and state governments when required by law.

Individuals have the right to review their own records in accordance with University personnel policy and collective bargaining agreements. Information on applicable policies and agreements can be obtained from campus or Office of the President Staff and Academic Personnel Offices.

The official responsible for maintaining the information contained on this form is the Vice President - University of California Human Resources, 1111 Franklin Street, Oakland, CA 94607-5200.

FEDERAL

Pursuant to the Federal Privacy Act of 1974, you are hereby notified that disclosure of your Social Security number is mandatory. The University's record keeping system was established prior to January 1, 1975 under the authority of The Regents of the University of California under Article IX, Section 9 of the California Constitution. The principal uses of your Social Security number shall be for state tax and federal income tax (under Internal Revenue Code sections 6011, 6051 and 6059) reporting, and/or for benefits administration, and/or to verify your identity.