



200 Orange Street, 4th Floor, Suite 405
New Haven, Connecticut 06510
Tel. (203) 946-8296 - Fax (203) 946-5791

CITY OF NEW HAVEN
CITY EMPLOYEES' RETIREMENT FUND (CERF)
NOTICE OF EMPLOYMENT

Employee Name: _____

Date of Birth: _____ Date Employed: _____

Email: _____

Department: _____ Title: _____

Permanent: Yes No

Full Time: Yes No

TO BE COMPLETED BY DEPARTMENT:

Date Entered Pension Fund: _____

Annual Salary: \$ _____ Local: _____

Department Head Signature

Date

CERTIFIED CORRECT:

Employee Signature

Date

IMPORTANT: This form should be completed on all new City Employees

Send original to the City Employees' Retirement Fund
200 Orange Street, 4th Floor, Suite 405, New Haven, CT 06510

Retain one copy in Pension Office file