**TTU**

**INSTRUCTIONS FOR COMPLETING ENROLLMENT FORM**:

MUST BE INK AND LEGIBLE OR TYPED.

**PART 1**: **Employee Information**

* All items must be completed by employee
* Edison ID –ID # is on your Caremark pharmacy card. It starts with 00
* Marital Status: Single, Married, Divorced or Widow
* Employing Agency: TTU
* Employer Group: TBR

**Part 2: Health Coverage Section – IF YOU ARE CURRENTLY ENROLLED AND WANT TO CHOOSE YOUR HEALTH OPTION**

* Select Region (Cookeville is Middle)
* Select Benefit Option (Partnership or Standard)
* Select Carrier
* Select Premium Level

**Part 3: Dental Coverage Selection**

* If you currently have coverage and want everything to stay the same – **DO NOTHING ON THIS FORM!!!!!!**
* If you want to change your coverage plan, premium level – you must complete Part 3.

**Part 4: Coverage Cancellation**

* If you are currently enrolled in Health coverage and do NOT want health coverage in 2011 – You must check the box to cancel Health coverage
* If you are currently enrolled in Dental coverage and do NOT want dental coverage in 2011- You must check the box to cancel Dental coverage

**Part 5: Dependent Information**

* If you are currently enrolled in Health OR if you are enrolling in Health, you must complete all of the dependent information for everyone you want covered under the 2011 health plan. Check the health box.
* If you are enrolling a new dependent in health coverage –you must attach proof of dependent’s eligibility.
* If you are changing your dental coverage or the dependents you are covering under dental, you must complete the dependent information and check the Dental box for all dependents you want to cover under the Dental Plan. If you are not changing dental and keeping the same dependents – DO NOTHING!

**Part 6: Employee Authorization**

* Sign
* Date
* Phone Numbers

**VERY IMPORTANT**

Run a copy of your completed form **BEFORE** you come to HR. HR will not make a copy for you.

Bring the original and copy to HR.

HR will date stamp both forms. HR will keep original – employee keeps copy.

It is the employee’s responsibility to provide a date stamped form to prove they enrolled if for any reason your form is lost in the process.

**You do have to re-enroll in Flex Spending each year – the form and booklet is online**

**If you are not making any changes to Life, LTD, Special Accident – DO NOTHING!**