

**Egg Harbor Township School District
Affirmative Election Form
Effective January 1, 2021 – Return by **November 9, 2020****

FAILURE TO COMPLETE & RETURN THIS FORM WILL RESULT IN A CHANGE TO YOUR BENEFITS

Upon completion this form should be submitted to the EHT Schools Benefits Office located at the Slaybaugh Primary School Administrative Office

EMPLOYEE PARTICIPANT INFORMATION

Please PRINT and fill out this section COMPLETELY

DOB:	First Name:	Last Name:	M.I.:
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For Employees Before 07/01/2020

_____ I want to keep my **CURRENT PLAN** and make no changes to my coverage for plan year effective 1/1/2021.

Employee Signature

Employee
Signature:

Date:

This Section for Employer Use Only

Approved by:

Date: