ACKNOWLEDGEMENT FORM

FACULTY ORIENTATION CHECKLIST

Becoming a Hokie
- Welcome from Dr. Sands
- About Us
- Extended Campus Locations
- History of Virginia Tech
- Mission, Vision, and Strategic Plan
- That I May Serve
- What is a Hokie

Life At Virginia Tech
- Surrounding Area
- Arts
- Benefits of Being an Employee
- Discounts and Perks
- Athletic Tickets
- Sustainability
- Dining Halls
- Hokie Passport

Work at Virginia Tech
- Hands on, Minds on
- University Leadership
- Shared Governance
- Department of Human Resources
- Work/Life Assistance
- Inclusive VT
- Parking
- Information Technology
- Environmental Health and Safety
- University Relations
- Conflict of Interest
- Payroll
- Safety

Benefits at Virginia Tech
- Health Insurance
- Flexible Spending
- Other Insurance Options (Life insurance and Accidental Death & Dismemberment)
- Long Term Care
- Legal Resources
- Aflac

Learn at Virginia Tech
- Professional Development
- Tuition Assistance
- University Libraries

Faculty Benefits
- Faculty Retirement
- Voluntary Retirement Savings Plan
- Faculty Leave

ACKNOWLEDGEMENT OF BENEFITS ENROLLMENT DEADLINES

Health Insurance Enrollment – within 30 days of the date of hire
Flexible Spending Accounts – within 30 days of the date of hire
Optional Life Insurance – within 31 days of the date of hire (guarantee issue)
Retirement Election (VRS or ORP) – 60 days from employment date
ICMA-RC 457(b) Plan Auto Enrollment (Plan 1 & Plan 2) – 90 days from employment date

VRS Hybrid Defined Contribution – March 15, June 15, September 15, and December 15 after the first payroll deduction for retirement

Optional Long Term Care Enrollment – within 60 days of the date of hire (guarantee issue)

Optional Legal Resources – within 60 days of the date of hire

Optional Aflac Plans – within 30 days of the date of hire

Optional Accidental Death & Dismemberment – no deadline

Optional New York Life (whole life policy) – within 60 days of the date of hire after completing six months of employment with a minimum of 30 hours worked per week

FACULTY LONG TERM DISABILITY AGREEMENT

This is to acknowledge that I have been notified of coverage for the Faculty Long Term Disability Plan with the Standard Insurance Company and that I am being enrolled in the Faculty LTD Plan. The following guidelines apply:

- The coverage is required for all faculty enrolled in the Optional Retirement Plan (ORP) and those faculty in the Virginia Retirement System (VRS) in lieu of the Virginia Sickness & Disability Plan.
- Premiums will be deducted from my pay.
  - Monthly Income Benefit Premium: .17% of monthly wage base
  - Monthly Annuity Benefit Premium: .09% of monthly wage base

ACKNOWLEDGMENT

I acknowledge that I have attended orientation and had all of the above information (orientation checklist, enrollment deadlines, and faculty long term disability) explained to me. I have been given the opportunity to ask questions for clarification.

OR

I acknowledge that I have been given the opportunity to review the above information (orientation checklist, enrollment deadlines, and faculty long term disability) by visiting: www.hr.vt.edu and clicking on the New Employee Orientation icon. I have been given the opportunity to ask questions for clarification.

________________________________________                  ______________________________________
Print Full Name                                             Virginia Tech ID Number

________________________________________                  __________________________
Signature                                                  Date