MISSISSIPPI STATE UNIVERSITY PRE-TAX BENEFIT PLAN ENROLLMENT FORM

NAME:	MSU ID	<mark>:</mark>	<mark>Date of Bir</mark>	<mark>th:</mark>
ADDRESS:	City	Chala	7:	
Mailing Address	City	State	Zip	
Instructions: For each coverage selected	d, please enter th	e correct sem	i-monthly premium	. If you have premiums
under the column labeled "PRE TAX," re	ad the "PRE-TAX	ELECTION " se	ection below, sign, a	nd date.
ELIGIBLE COVI			PRE-TAX	AFTER-TAX
State Employees' Health Insurance			\$	
State Employees' Life Insurance Pl			\$	
Delta Dental			\$	
Davis Vision			\$	
Accidental Death & Dismemberme			\$	
AFLAC Accident Advantage			\$	
AFLAC Cancer Indemnity and Ride AFLAC Critical Care Protection and			\$ \$	
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Long Term Care – GENWORTH Long Term Disability – UNUM				\$
Long Term Disability – ONOM				۶
UNUM Term Life Insurance (emplo	•			\$
ONOW Term the mourance (emplo	yee, spouse, and,	or critical city.		Y
The following products are no longer offe	ered to new empl	oyees. Emplo	yees who are currer	ntly enrolled in these
oroducts and need assistance with dropp Benefits Office, (662)325-3713; located in -AFLAC Intensive Care	ing coverage or h	nave questions Room 150. - CNA	about their coverag	-
products and need assistance with dropp Benefits Office, (662)325-3713; located ir -AFLAC Intensive Care	ing coverage or han McArthur Hall Follows Term Care Follows Universal Life – I	nave questions Room 150. - CNA	about their coverag	ge may contact the MSU
	PRE-TA d by Mississippi S ed under Section e benefit option(s n. I understand p ce social security qualified status c nployment status ithin 60 days of t y salary will auto ny benefits election e balary reduction of salary reduction of ll cease upon terr	tate University 125 of the Interest Penel Pace 125 of the Inte	-Critical Illr ific UNUM y are available to me ernal Revenue Code ed and I understand as are not eligible as ctions are irrevocable orce, marriage, death or employee/spouse age date. If the elect st to reflect the char to complete and retu y election will remain agreement to satisfy inployment. This elect	e through payroll deduction (IRC). My salary will be that I must complete an deductions for federal or the plan year (Jan. 1 and spouse or dependent, take an unpaid leave of the dinsurance benefit (s) and the same. My employer or certain provisions of the
Products and need assistance with dropp Benefits Office, (662)325-3713; located in -AFLAC Intensive Care -Whole Life (& Riders) - UNUM - Understand that eligible benefits offered under the Pre-Tax Benefit Plan as provide reduced by amounts shown above for the application for coverage for each election state income tax purposes and may reduce Dec. 31) except for modifications due to birth or adoption of a child, change of emabsence). Such changes must be made we premiums are increased or decreased, mill be given the opportunity to change may reduce or cancel the amount of my state increased or decreased in the amount of my state increased in the amount of my state in the amount of my state in the amount of my state increased in the amount of my state in the amoun	PRE-TA d by Mississippi S ed under Section e benefit option(s n. I understand p ce social security qualified status c nployment status ithin 60 days of t y salary will auto ny benefits election e balary reduction of salary reduction of ll cease upon terr	tate University 125 of the Interest Penel Pace 125 of the Inte	-Critical Illr ific UNUM y are available to me ernal Revenue Code ed and I understand as are not eligible as ctions are irrevocable orce, marriage, death or employee/spouse age date. If the elect st to reflect the char to complete and retu y election will remain agreement to satisfy inployment. This elect	e through payroll deduction (IRC). My salary will be that I must complete an deductions for federal or the plan year (Jan. 1 and spouse or dependent, take an unpaid leave of the dinsurance benefit (s) and the same. My employer or certain provisions of the

STATUS CHANGE:

ELIGIBILITY DATE:

Payroll Effective Date: