



PRINT ALL INFORMATION
www.lasersonline.org

P.O. Box 44213, Baton Rouge, LA 70804-4213
225.922.0600 · Toll-Free 1.800.256.3000
225.922.0612 (hearing impaired)

Certification of Adult Probation and Parole Officer Employment

Member's First Name	Middle Name	Last Name	Today's Date	Social Security Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

IMPORTANT: Complete the entire form. Follow the specific instructions for each section. All dates should be in MM/DD/YYYY format.

SECTION 1: MEMBER'S INFORMATION

Member's Mailing Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Daytime Area Code/Phone Number	Evening Area Code/Phone Number	Email Address	Member's Birth Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION 2: INSTRUCTIONS

Adult Probation and Parole Officers employed prior to January 1, 2002, and who retire or enter DROP as an Adult Probation and Parole Officer on or after July 1, 2014, may be eligible to receive accrual rates according to Act 852 of the 2014 Legislative Session.

For employees who submit requests to LASERS, it is necessary for the agency to certify Adult Probation and Parole Officer status with each request. If the member is retiring or entering DROP, this form must be forwarded to LASERS immediately following the date of termination regardless if the form was previously submitted for prior requests.

Check only one of the following:

- Estimate Request: Customer Service Appointment or Benefits Estimate Request Submitted
- Service Purchase / Transfer of Creditable Service Application
- Retirement Application Submitted (Regular Retirement, DROP, After DROP, IBO, Disability)

SECTION 3: CERTIFICATION OF EMPLOYMENT (to be completed by the agency)

Please answer both questions:

Was the above employee an Adult Probation and Parole Officer prior to January 1, 2002? Yes No

Is the above employee currently employed and/or retiring or entering DROP after July 1, 2014, as an Adult Probation and Parole Officer? Yes No

I certify that all information provided on this document is true and correct.

Name of Personnel Officer	Title	Name of Agency	Agency 3 digit Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Mailing Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signature of Personnel Officer	Date	Daytime Area Code/Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>