

**UF 403(b) Retirement Plan  
 Hardship Withdrawal  
 Employee Statement Form**

The following documents are required to apply for a hardship withdrawal from UF's 403(b) plan:

1. The Hardship Withdrawal Employee Statement Form. Complete ALL sections of this form.
2. Hardship withdrawal paperwork provided by your investment provider, completed and signed.
3. Certificate of hardship withdrawal eligibility from the Retirement Manager system: You can access the system at <https://www.myretirementmanager.com/?uof>. A reference guide is available at <http://hr.ufl.edu/retirement/forms/DistributionEligGuide.pdf> to help you navigate the system.
4. Documentation that supports the purpose for the hardship withdrawal and amount. Acceptable documentation for each hardship withdrawal reason is listed on Page 2.

The required documents should be submitted to UF Retirement Services, P.O. Box 115005, Gainesville, FL 32611. Faxes are also accepted (352-392-5166).

*All forms and documents must be completed by applicant and accepted by UF Retirement Services **prior** to approval of your request. Acceptance of this form does not guarantee access to funds.*

<b>A. Personal Information Please print clearly</b>	
Name:	UF ID:
Email:	Daytime Phone:

<b>B. Purpose Criteria Only check those boxes that apply</b>
<input type="checkbox"/> To purchase participant's principal residence
<input type="checkbox"/> To prevent eviction from or foreclosure on participant's principal residence
<input type="checkbox"/> To pay for college tuition expenses for participant, spouse, or dependent
<input type="checkbox"/> To pay medical expenses for participant, spouse, or dependent
<input type="checkbox"/> To pay for funeral expenses for spouse, dependent or parent
<input type="checkbox"/> To pay for repairs to participant's principal residence resulting from major disaster

<b>C. Hardship Amount Requested:</b>	\$
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**D. Applicant's Acknowledgment**

I affirmatively represent that the amount I am applying for does not exceed the amount needed to satisfy the immediate and heavy financial need that I am currently under. I further certify that I cannot reasonably obtain the funds from another source. I have read this agreement and assume full responsibility for any consequences or tax liabilities that may result from my hardship withdrawal. I hereby agree to indemnify UF for any and all liability and expenses incurred by UF resulting from misstatement or omissions made by myself in this agreement.

Print Name \_\_\_\_\_ UF ID \_\_\_\_\_

Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>For Internal Use Only</b>	
Date received:	Date approved:
Reason for disapproval:	

## Accepted Documentation for Hardship Withdrawals

### A) To purchase applicant's principal residence

- Estimated closing statement or good faith estimate prepared by the lending agency that clearly reflects the participant's name as the buyer, the address of the new residence, the participant's signature, and the amount of money required at closing.
- Copy of the purchase agreement for the named property signed by the buyer and seller that includes the balance of the purchase price.

### B) To prevent eviction from or foreclosure on participant's principal residence

- Copy of the eviction notice, foreclosure notice, court order or letter from your landlord or mortgage company clearly stating that eviction/foreclosure is pending unless a specific payment amount is received by a specific date.
- Letters from your landlord or mortgage company must be current and on business letterhead.
- Bankruptcy and tax sale notices are not acceptable documentation.

### C) To pay for college tuition expenses for participant, spouse, or child

- Copy of registrar's statement from the post-secondary school that clearly states the student's name, dates of the school term, and tuition balance amount owed (after financial aid awards are deducted) for the current term in which the student is enrolled and/or up to 12 months in the future.
- Reimbursement for previous term expenses is not permitted.
- Amounts cited in the documentation must be actual charges and not estimates.
- Expenses for books are not included.
- Expenses for room and board will be covered only if provided by the post-secondary school.

### D) To pay for medical expenses of participant

- Copies of current doctor, pharmacy and/or hospital itemized bills that clearly reflect the statement date, patient's name, date(s) of service, and patient's financial responsibility.
- The itemized bill should be on the provider's letterhead and the statement date should not be more than 60 days prior to request, although the actual date(s) of medical service may be older.
- Services provided must be "medically necessary". Cosmetic surgery is generally not considered a medical necessity for hardship withdrawal purposes, unless it is related to a congenital abnormality, disease, or personal injury resulting from an accident or trauma.

### E) To pay for funeral expenses for spouse, dependent or parent

- Copy of the invoice from the funeral home or other service provider indicating that the participant is responsible for the expenses.
- You will also need to provide proof of the deceased's relationship to you if it is not documented in your benefits file.

### F) To pay for repairs to participant's principal residence resulting from major disaster

- Copy of estimate or bill that clearly states the address of the principal residence, the participant as the owner, the damage sustained (and cause), and the participant's financial responsibility for the repair.
- Cosmetic changes to a primary residence are not covered.
- Repairs due to "wear and tear" are not covered.