



**Clark University**  
**Section 125 Flexible Benefits Enrollment Form**  
 Plan Year January 1 through December 31, 2021

Massachusetts Data Privacy Laws protect information in "red" on this form.

**To guard against violating MA Data Privacy Laws and University policy, only upload this form electronically to HR's secure download site. Otherwise, please bring this form to HR in person or mail it.**

**Participant Information (Required information)**

Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle initial \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Clark Employee ID# \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Date of Hire \_\_\_\_\_

<b>Employer's use only</b>	Effective Date: _____	Per Pay Period Amount: _____	1 <sup>st</sup> Payroll Deduction Date: _____
----------------------------	-----------------------	------------------------------	---

**Flexible Spending Accounts (election amounts are withheld over 24 bi-weekly pay periods)**

**Annual Spending Account Elections for Plan Year:** I request the following amounts be deducted from my pay with pretax dollars

**Health Care Spending Account**  
 (\$2,750 maximum)                      \$ \_\_\_\_\_ Annual

**Dependent Day Care Spending Account**  
 (\$5,000 per family or \$2,500 for married employee filing separate tax returns.)                      \$ \_\_\_\_\_ Annual

**Dependent Information**

Dependent's Last Name, First Name	Relationship	Social Security Number	Date of Birth

**Spending Account Agreement**

The amount(s) I have elected will be taken from my pay in equal installments on a pretax basis. I understand that if I fail to submit eligible claims for entire amount elected, I forfeit any remaining balance. The election(s) will continue throughout the Plan Year or until I notify the company in writing of a qualifying Status Change. If I have provided an email address, I am requesting that all possible communications be sent through email.

Signature \_\_\_\_\_

Date: \_\_\_\_\_