



Online User Enrollment

515-201-16
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This form is to request access to the OPERS Employer Website at <https://connect.opers.state.ok.us/>. Access will only be granted to OPERS retirement coordinators. To be listed as an OPERS retirement coordinator, you must first complete the *Employer and Retirement Coordinator Verification* form. Please contact OPERS at (405) 858-6737 with any questions.

PART 1 — EMPLOYER INFORMATION

_____ Employer Name	_____ Employer number
_____ Mailing address (Street or P.O. Box, City, State Zip)	_____ Phone number

PART 2 — USER REQUEST INFORMATION

Please check one: Add Change Delete

Name

_____ Email	_____ Phone
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Transaction access (Please check all that apply)	<input type="checkbox"/> Online Enrollment	<input type="checkbox"/> Final Retirement Certification
	<input type="checkbox"/> Payroll Reporting	<input type="checkbox"/> Employee Address Change

PART 3 — EMPLOYER APPROVAL

_____ Supervisor Name	_____ Title
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_____ Email	_____ Phone
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_____ Supervisor Signature	_____ Date
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PART 4 — TO BE COMPLETED BY OPERS

_____ Approved By	_____ Date
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_____ Completed By	_____ Date
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User ID Assigned