2003 CalSTRS/EMPLOYER INSTITUTE

“COMMUNICATING CHANGE TOGETHER”

EARLY BIRD REGISTRATION IS ESSENTIAL DUE BY JANUARY 24, 2003
LATE REGISTRATION DUE BY FEBRUARY 28, 2003

Advance registration is necessary to provide for meals and adequate seating arrangements at the conference. Space is limited, so please make your reservations early. FAX REGISTRATIONS CANNOT BE ACCEPTED. Complete and return this form along with your check or money order made payable to CalSTRS/Employer Institute. NO REFUNDS can be made, however a substitute attendee will gladly be accommodated.

(PURCHASE ORDERS CANNOT BE ACCEPTED. PAYMENT MUST ACCOMPANY THIS FORM.)

REGISTRATION

The registration fee covers a continental breakfast and luncheon on Thursday and Friday, break refreshments, binders and materials. You will also receive a tote bag for the convenience of handling your binders and materials. For the two-day conference, registration fees are:

- $210.00 - if postmarked by JANUARY 24, 2003
- $235.00 – if postmarked between JANUARY 26, 2003 & FEBRUARY 28, 2003

If you have any questions or concerns, please call Rhonda E. Carroll at (916) 229-3831 or e-mail her at rcarroll@calstrs.ca.gov.

ENROLLMENT

Please enroll this person in the Institute checked below. (Please use a separate form for each attendee. This form may be reproduced.) NOTE: This form is only to reserve a space at the Institute. Those attending must make their own guest room reservations by calling the hotels below and identifying themselves as CalSTRS/Employer Institute attendees.

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<tr>
<th>NAME</th>
<th>E-MAIL ADDRESS</th>
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CONFERENCE SELECTION

SOUTHERN CALIFORNIA INSTITUTE
APRIL 3 and 4, 2003
Thursday & Friday
Renaissance, Long Beach Hotel
111 East Ocean Blvd.
Long Beach, CA 90802
1(562) 437-5900
www.renaissancehotels.com
ROOM RATE: SINGLE/DOUBLE $125.00

NORTHERN CALIFORNIA INSTITUTE
MAY 13 and 14, 2003
Tuesday & Wednesday
Doubletree Hotel, Monterey
Two Portola Plaza
Montery, CA 93940
1(800) 222- TREE or 1(831) 649-4511
ROOM RATE: SINGLE/DOUBLE $133.00

SPECIAL ACCOMMODATIONS
/__HANDICAP ACCESS /__HEARING IMPAIRED /__/SIGHT IMPAIRED /__/SPECIAL DIETARY NEEDS
(Be Specific)
Please explain:

WORKSHOP SELECTION

I plan on attending the following workshops:

DAY ONE

GENERAL SESSION

___ 8:45 – 9:00 Introduction
___ 9:00 - 9:15 State of CalSTRS
___ 9:15 - 9:30 Overview of CalSTRS
___ 9:30 – 10:00 Medicare Premium Payment Program
___ 10:00 – 10:45 Interactive Internet Presentation
___ 10:45 – 11:00 BREAK
___ 11:00 – noon The Right Stuff: Employer Responsibilities
___ noon - 1:00 LUNCH
___ 1:00 - 2:15 Service Retirement – Employer’s Role in Retirement
___ 2:15 - 2:30 BREAK
___ 2:30 - 3:30 Disability Services
___ 3:30 - 5:00 Survivor Benefits
___ 5:00 - 6:00 RECEPTION

DAY TWO

Break Out Room 1

Break Out Room 2

___ 8:30 - 9:30 School District Audits
___ 9:30 - 10:30 Cash Balance Tech.
___ 10:30 - 10:45 BREAK
___ 10:45 – 12:15 Accounting

Legislation

Audit

Overview

___ 10:30 - 10:45 BREAK

___ 10:45 – 12:15 Manager/Supervisor Track

Health Security Accounts
### DEMOGRAPHIC SURVEY

<table>
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<tr>
<th>EMPLOYER</th>
<th>POSITION LEVEL</th>
<th>FUNCTION</th>
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<tr>
<td>( ) County Office</td>
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<td>( ) Independent Consultant</td>
<td>( ) Clerical/Technician</td>
<td>( ) Retirement</td>
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Have you attended other CalSTRS/Employer Institutes? Yes ____  No ____

If yes, When? ________________________________________________

Return entire form to:
California State Teachers’ Retirement System
ATTN: Rhonda E. Carroll - MS#-35
P.O. Box 15275
Sacramento, California 95851-0275