

National Guard CSRS Disability Retirement Checklist

This list identifies the forms that must be submitted when applying for a disability retirement under the Civil Service Retirement System (CSRS). These forms are available through the ABC-C website <https://www.abc.army.mil>.

REQUIRED BASIC RETIREMENT FORMS

FORM NUMBER AND TITLE	REQUIREMENT
SF 2801, Application for Immediate Retirement	Required in all cases.
SF 2801, Schedule A - Military Service Information Schedule B - Military Retired Pay Schedule C - Federal Employees Compensation Information	Required if you served in the military. Required if you served in the military and are receiving retired military pay. Required if you received OWCP benefits.
SF 2801-1, Certified Summary of Federal Service	DO NOT attempt to complete this form. The ABC-C will verify your service.
SF 2801-2, Spouse's Consent to Survivor Election	Required if you are married at retirement and do not elect a full survivor annuity for your current spouse.
SF 2818, Continuation of Life Insurance Coverage	Required when eligible to carry into retirement (even if electing not to). This form MUST contain four signatures.
W-4P, Withholding Certification for Pension or Annuity Payment	Required for tax withholdings from annuity.
State Tax Forms	If applicable
Copy of marriage certificate	If married at retirement
Copy of Divorce Decree	If applicable
Military Service	See Military Forms and Documents below

REQUIRED DISABILITY RETIREMENT FORMS

FORM NUMBER AND TITLE	REQUIREMENT
SF 3112a, Applicants Statement of Disability	Required in all cases.
SF 3112B, Supervisor's Statement	Required in all cases.
SF 3112C, Physician's Statement	Required in all cases.
SF 3112D, Agency Certification of Reassignment and Accommodations Efforts	Required in all cases.
National Guard Disability Waiver Statement	Required if applying under PL 97-253
Notice of Termination from National Guard Technician Position	Required if applying under PL 97-253
Discharge Notice/Orders from National Guard (military)	Required if applying under PL 97-253
Medical Evidence	Required in all cases
Copy of Last Performance Appraisal	Required in all cases
Copy of Position Description	Required in all cases
Proof of Application for Social Security Disability Benefits	Required if you are covered under CSRS Offset
FEDMER Statement	Required if you are covered under CSRS Offset

OPTIONAL HEALTH BENEFITS FORMS

FORM NUMBER AND TITLE	REQUIREMENT
RI 79-9, Health Benefits Cancellation/Suspension Confirmation	Required only if you are suspending your FEHB in retirement to use TRICARE or a Medicare Advantage health plan.
SF 2809, Health Benefits Registration Form	Required only if you are making an Open Season election and will retire before the effective date; moving outside of your current HMO plan. The SF 2809 will be processed by OPM and not ABC-C.
TRICARE/CHAMPUS Certification Letter	Required if using TRICARE/CHAMPUS coverage to meet the five-year requirement for taking FEHB into retirement. The TRICARE Office can provide a certification letter. NOTE: You MUST be enrolled in FEHB on effective date of retirement.

OPTIONAL BENEFICIARY FORMS IF YOU NEED TO UPDATE

FORM NUMBER AND TITLE	REQUIREMENT
SF 2808, Designation of Beneficiary (CSRS)	Required if you want to update beneficiary information.
SF 2823, Designation of Beneficiary (FEGLI)	Required if you want to update beneficiary information.
TSP-3, Designation of Beneficiary	Changes should be sent directly to TSP for processing (mailing address is listed on the form).

MILITARY FORMS AND DOCUMENTS AS APPLICABLE

FORM NUMBER AND TITLE	REQUIREMENT
DD Form 214, Report of Separation from Active Duty (or equivalent)	Attach a copy for all periods if you have served in the military. The DD Fm 214 MUST reflect character of service.
Waiver of Military Retired Pay (copy) or acknowledgment of the waiver from Military Finance Office.	Required to waive military retired pay to use military service in CSRS annuity. Letter should also be sent to Military Finance Office at least 90 days but no later than 60 days before planned retirement date to preclude overpayments.
Proof of payment of military deposit (OPM Form 1514, Military Deposit Worksheet OR equivalent)	Required if you paid for military service performed on/after January 1, 1957.
OPM Form 1515, Military Service Deposit Election	Required for military service performed after 1956 and military service deposit has not been paid.
SF 2802, Application for Refund of Retirement Deductions (CSRS)	Required if applying for a refund of Post-1956 military service deposit because you do not want to waive military retired pay.