

# Application to Purchase Service

New Brunswick Teachers' Pension Plan



## Please print all information

Given Name \_\_\_\_\_  
Surname \_\_\_\_\_  
Maiden Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Email Address \_\_\_\_\_  
SIN \_\_\_\_\_

### To be completed by District Payroll Officer

District \_\_\_\_\_

I hereby certify that the teacher identified on the left is presently a contributor to the above pension plan and that the teacher's salary particulars are currently as follows:

Certificate \_\_\_\_\_ year level \_\_\_\_\_ % of work week \_\_\_\_\_

Authorized full-time annual salary (gross) \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Dates of the period of service for which you wish to receive a statement of cost of purchase:

From: \_\_\_\_\_ To: \_\_\_\_\_

Have you made recently or are you attaching applications to purchase other periods of service? If yes, how many \_\_\_\_\_

## Type of Service (Check one and enter the requested information)

- Service for which you have received a refund from the NB Teachers' Pension Plan, or the NB Public Service Pension Plan  
Plan \_\_\_\_\_ Approximate date on which you received the refund \_\_\_\_\_
- Full-time teaching service in a public school elsewhere in Canada or in the Commonwealth, in Canadian Government Schools (Military, First Nations), or in a foreign country with external affairs or CIDA (attach proof of refunded service with exact dates)
- Local permit or other full-time public teaching service in NB after 1955 (attach proof of refunded service with exact dates)
- Maternity/Adoption/Parental Leave (maximum 1 year - attach proof of leave from district office and copy of child's birth certificate)
- Interim period of advanced full-time training in approved courses (University or School of Education) (attach proof of leave from district office and transcript of marks)
- Leave of absence without pay (includes part-time leave - maximum 2 years - attach proof of leave from district office)
- Service as a member of the legislative assembly not counted for a pension under the Members' Superannuation Plan
- Supply Teaching (attach proof from the school district office)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Have your payroll officer complete section above on right and forward completed form with attachments (as required) to:**

**Vestcor**  
P.O. Box 6000  
Fredericton, NB E3B 5H1

Email: [info@vestcor.org](mailto:info@vestcor.org)  
Fax: 506-457-7388

Telephone: 506-453-2296  
Toll Free: 1-800-561-4012  
Website: [www.vestcor.org/pensions](http://www.vestcor.org/pensions)