

**PENSION PLAN FOR PART-TIME & SEASONAL  
EMPLOYEES OF THE PROVINCE OF NEW BRUNSWICK  
OPTION TO PARTICIPATE**

**1. PERSONAL INFORMATION**

Name: \_\_\_\_\_ S.I.N.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 \_\_\_\_\_ DD MM YYYY  
 \_\_\_\_\_

**2. EMPLOYMENT - Please complete section a), b) or c), whichever one applies to your situation:**

**a) Are you a new employee?**

Name of employer: \_\_\_\_\_

Employment status: \_\_\_\_\_

When did you commence employment? \_\_\_\_\_  
 DD MM YYYY

**b) Has there been a change in your employment status?  
(ex: from full-time to part-time)**

Name of employer: \_\_\_\_\_

Employment status: \_\_\_\_\_

Effective: \_\_\_\_\_  
 DD MM YYYY

Previous employment status: \_\_\_\_\_

Effective: \_\_\_\_\_  
 DD MM YYYY

**c) Additional information:**

Have you been employed by the Province of New Brunswick before? \_\_\_ YES \_\_\_ NO

If yes, please indicate the name of employer and approximate period of employment:

Employer: \_\_\_\_\_

From: \_\_\_\_\_ to: \_\_\_\_\_  
 DD MM YYYY DD MM YYYY

Did you, during this time, participate in one or more pension plan(s) sponsored by the Province of New Brunswick? \_\_\_ YES \_\_\_ NO

If yes, please indicate the name(s) of the pension plan(s):

Pension plan(s): \_\_\_\_\_  
 \_\_\_\_\_

**3. ACCEPTANCE / NON-ACCEPTANCE**

I have been informed of my option to participate in the Part-time & Seasonal pension plan and wish to confirm that (please select a or b below):

a) I \_\_\_\_\_ wish to become a contributor under this pension plan \_\_\_\_\_  
 (name) (effective date)

**OR**

b) I \_\_\_\_\_ **do not** wish to become a contributor under this pension plan \_\_\_\_\_  
 (name) (effective date)

*I understand that I am not precluded from entering the plan at a later date, and that my contributions will not be retroactive.*

Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 DD MM YYYY

Witness: \_\_\_\_\_ Date: \_\_\_\_\_  
 DD MM YYYY

**Note: Employer to retain a signed copy of the form in the employee file.**