PART-TIME LEAVE OF ABSENCE
New Brunswick Teachers' Pension Plan

VESTCOR

Teachers who are active contributors under the New Brunswick Teachers' Pension Plan (the "NBTPP"), were employed in a full-time capacity immediately prior, and were on an authorized approved leave of absence are eligible to purchase part-time leaves of absence as follows:

1. Applies to teachers who are job sharing (e.g., working only mornings or afternoons; or 3 days one week, two days the next);
2. Applies to teachers working less than 100% (e.g., working 80%, and on approved leave for 20%);
3. Must be a contributor to the NBTPP at the time of application; and
4. Subject to overall maximum of 2 years leave of absence for other reasons.

PLEASE COMPLETE THE INFORMATION BELOW AND SUBMIT WITH THE APPLICATION TO PURCHASE SERVICE. YOU MUST ALSO INCLUDE A COPY OF THE LETTER AUTHORIZING APPROVED LEAVE OF ABSENCE.

Section 1 - Personal Information

First Name: _____ Last Name: _____

SIN (optional): _____ / _____ / _____   Vestcor Reference Number:_____ **OR** Employee ID Number:_____

Section 2 - Leave of Absence Information

School Year Start Date	School Year Ending Date	Percentage of Time Worked	Percentage of Time on Leave of Absence

The Employee and Employer certify that the part-time leave of absence is in accordance with the provisions of the New Brunswick Teachers' Pension Plan. If inaccurate information is submitted, the part-time leave of absence cannot be purchased and will be revoked if purchased.

PRIVACY CONSENT: *The personal information collected on this form will be used by Vestcor to: identify the employee making the request; determine eligibility and the cost to purchase the service requested; contact the employee and/or employer as necessary; and ultimately ensure that the pension plan is administered in accordance with the pension plan's governing documents and applicable legislation. If you have any questions about the collection and use of this information, contact Vestcor's Member Services team, by mail at P.O. Box 6000, Fredericton, NB, E3B 5H1, by phone at (506) 453-2296 or 1-800-561-4012, or by email at info@vestcor.org. In addition, please note that Vestcor's Privacy Statement is available at www.vestcor.org/privacy.*

AUTHORIZATION: *I certify that the information above is accurate.*

Employee Signature: _____ Date _____ / _____ / _____
                                                              Day   Month   Year

Employer Signature: _____ Date _____ / _____ / _____
                                                              Day   Month   Year

Please return completed form as soon as possible to:
Vestcor
P.O. Box 6000, Fredericton, NB E3B 5H1
Fax: 506-457-7388

For more information, please contact Vestcor at:
Telephone: 506-453-2296 or 1-800-561-4012 (toll free)
Email: info@vestcor.org
Website: vestcor.org

IMPORTANT: Information submitted via email is not considered secure unless encrypted. If you would like to submit this form via email and do not have a method to encrypt it, please contact our office in order to submit this form electronically in a secure format.