Supply Teaching

New Brunswick Teachers' Pension Plan



Teachers who are currently contributors under the New Brunswick Teachers' Pension Plan (the "NBTPP") and who supply taught (were hired as a substitute teacher) in the Province of New Brunswick, are eligible to purchase supply teaching time based on the following guidelines:

- 1. Must be a contributor to the NBTPP at the time of application, on or after April 1, 1999;
- 2. Cannot purchase supply teaching time if service is already credited while a contributor to the NBTPP;
- 3. Cannot purchase supply teaching time if out on an approved leave of absence (e.g., maternity); and
- 4. If hired on a local permit as a substitute teacher, and now an active contributor, the supply teaching service is eligible to be purchased.

Section 1 - Personal Informa	ntion		
rst Name: Last Name:			
SIN (optional): / /	Vestcor Reference Nu	ımber: OR Emplo	oyee ID Number:
Section 2 - Supply Teaching	Dates		
School Year Commencement Date	School Year Ending Date	Number of Supply Teaching Days in School Year	School District (where service occurred)
The Employee and Employer ce Brunswick Teachers' Pension Pl and will be revoked if purchase PRIVACY CONSENT: The personal informati eligibility, the cost to purchase the period(s,	lan. If inaccurate information is ed. on collected on this form will be used by Ves.) of service requested, and the amount of se	s submitted, the supply teaching stoor to: identify the employee making the ervice that would be credited as a result of	request and the employer; determine purchasing the period(s); contact the
teacher or employer as necessary; and ultin legislation. The information may be disclose contact Vestcor's Member Services team, b info@vestcor.org. In addition, please note AUTHORIZATION: I certify that the inform	ed to the Canada Revenue Agency as requir y mail at P.O. Box 6000, Fredericton, NB, E3 that Vestcor's Privacy Statement is availabl	ed by law. If you have any questions abou B 5H1, by phone at (506) 453-2296 or 1-8	t the collection and use of this information,
AOTHORIZATION. I cerujy that the injoin	nation above is accurate		
Employee Signature:		D	Day / Month / Year
Employer Signature:		D	Day / Month / Year

Please return completed form as soon as possible to: For more information, please contact Vestcor at:

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

Fax: 506-457-7388

Telephone: 506-453-2296 or 1-800-561-4012 (toll free)

Email: info@vestcor.org Website: vestcor.org