



OPSEU Pension Trust Fiducie du régime de retraite du SEFPO

# Application for Past Service Credit

OPSEU Pension Trust 1 Adelaide Street East, Suite 1200, Toronto, Ontario M5C 3A7  
Telephone: 416-681-6100 Toll-free: 1-800-637-0024 Fax: 416-681-6175 [www.optrust.com](http://www.optrust.com)

Completed at enrolment  Completed during membership  Open option buyback

## Personal Information and Current Employment Information

The member must complete all sections.

### PERSONAL INFORMATION AND CURRENT EMPLOYMENT INFORMATION

Last Name: Doe First Name and Initials: Jane Date of Birth (DD/MM/YYYY): 01/02/1961 OPTrust ID Number: 123456789

E-mail Address: jane.doe@domain.com Home Telephone Number: 4161234567 Business Telephone Number: 4167654321

Home Address: Number and Street: 123 Any Street Apt. No.: 456

City/Town: Anyville Province: ON Postal Code: X0X 0X0

Name of current employer (ministry, agency, board, commission): Your Ministry

## Important Information

The member should read the information on the types of past service that can be purchased on page 2 and 3 of the form. For more information, please see the OPTrust booklet *Your Pension and Buying Back Credit* and accompanying fact sheet *Open Option Buyback*.

Important information is provided on the reverse side. Please take time to read it before completing this section.

## Past Service Information

The member should provide the details for all previous periods of employment and employer information. OPTrust will use this form to process the buyback cost.

### PAST SERVICE INFORMATION

Name of your employer during the past service: Employer Name of your pension plan, if you contributed during the past service: Pension Plan

Type of past service: (Please check )  (A) or (D) Service with an employer who contributed to the OPSEU Pension Plan, Public Service Pension Plan or its predecessor.  (B) or (D) Leaves of absence during which contributions were not made:  a leave without pay for illness, WSIB, pregnancy, parental leave or adoption of a child.  a leave without pay for special or educational purposes.  Other: \_\_\_\_\_

Period of service: From (DD/MM/YYYY): 01/09/2008 To (DD/MM/YYYY): 01/10/2009

From (DD/MM/YYYY): DDMMYYYY To (DD/MM/YYYY): DDMMYYYY

(C) or (D) Service with a registered Canadian pension plan other than (A):  Service before January 1, 1992 where contributions remain in the previous pension plan.  Service after December 31, 1991.

From (DD/MM/YYYY): DDMMYYYY To (DD/MM/YYYY): DDMMYYYY

If either (A) or (C) above are applicable, did you receive:  a refund  a commuted value transfer to a locked-in retirement savings plan  a deferred pension  no payment because you did not make contributions during that period.

I have read and understand the application rules provided on the reverse side of this form. I understand that it is my responsibility to ensure that OPTrust receives this application form within the 24-month application time limit, with the exception of an open option buyback, explained on the reverse.

Member's Signature: Jane Doe Date Signed (DD/MM/YYYY): 04/02/2010

OPTrust 1036 (02/10)

Keep a copy of this form for your records.