

Temporary Part-Time Work Arrangement Application to Purchase Pension Credit

Public Service Pension Plan (PSPP)

Complete this form if you participated in a temporary part-time work arrangement agreed to with your employer. Please note that your arrangement must have ended to submit an application. For more information on eligibility for this buyback, visit OPB.ca/temp-part-time.

Member instructions

- Please complete page 1 of this form
- Submit all pages of the form to the employer with whom you participated in a temporary part-time work arrangement. The employer will forward it to OPB along with the other required information

OPB client number

OPB client information

OPB client last name (please print)	OPB client first na	ame	Initials
Apt. number Street address			
City	Province Postal code	Contact telephone	
Period of service			
Application date (YYYYMMDD)			
I am applying to purchase pension credit	for the following period of s	service:	
Period of service from (YYYYMMDD) Period of service from (YYYYMMDD)	iod of service to (YYYYMMDD)		
If exact dates are unknown, enter approxima	te dates	_	

The personal information on this form is collected under the authority of the *Public Service Pension Act* and will be used only to administer pension benefits. For more information or if you have any questions, contact Client Services or our Privacy Officer at:

Telephone 416-364-5035 or toll-free 1-800-668-6203 (Canada & USA) | OPB.ca



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Employer instructions

On pages 3 and 4 of this form, please provide the following information for the temporary part-time work arrangement period:

- the exact start and end dates of the temporary part-time work arrangement period,
- · the member's rate of pay during the period, and
- the member's part-time ratio during the period (e.g., if the member is Unclassified and works variable hours); if no part-time ratio is available, please provide the standard hours for a full-time employee in the same position and the actual hours worked by the member during the temporary part time arrangement period.

Employer certification

I certify the following:

- The member participated in a temporary part-time work arrangement as described in the information provided by the employer on this form.
- The terms of the temporary part-time work arrangement, including the end date of the arrangement, were

agreed in advance between the meml	ber and the employer.
Employer name	
Employer representative	Position title (must be in a Payroll/HR/Administrator role)
	Date signed (YYYYMMDD) Contact telephone
Employer representative signature	
Please send all pages of this form to OPB if it is missing pages or not completed cor	The member's buyback cost and/or processing time may be impacted rootly.



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Temporary part-time work arrangement - periods of service

If the member's salary or employment status (e.g., part time ratio or hours worked) did not change during the temporary part-time work arrangement period, please complete **only Box 1**. If there were any changes to the member's salary or employment status during the temporary part-time work arrangement period, please complete additional boxes as required.

1.	Start date (YYYYMMDD)	End date (YYYYMMDD)
	Rate of pay	
		Hourly Bi-weekly Semi-monthly Monthly
	Percentage	Hours
	Regular part-time ratio during period:	Actual hours worked OR during period:
	31	
		Standard full-time hours
		for member's position:
2.	Start date (YYYYMMDD)	End date (YYYYMMDD)
	Rate of pay	
	,	Hourly Bi-weekly Semi-monthly Monthly
	Percentage	Hours
	Regular part-time ratio during period:	Actual hours worked
	rade daming period.	
		Standard full-time hours
		for member's position:
3.	Start date (YYYYMMDD)	End date (YYYYMMDD)
	Rate of pay	
		Hourly Bi-weekly Semi-monthly Monthly
	Percentage	Hours
	Regular part-time ratio during period:	Actual hours worked OR during period:
	51	
		Standard full-time hours
		for member's position:



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4.	Start date (YYYYMMDD)	End date (YYYYMMDD)
	Rate of pay Regular part-time ratio during period: Percentage	Hourly Bi-weekly Semi-monthly Monthly Actual hours worked during period:
		Standard full-time hours for member's position:
5.	Start date (YYYYMMDD)	End date (YYYYMMDD)
	Rate of pay	
	Regular part-time ratio during period: Percentage	Hourly Bi-weekly Semi-monthly Monthly Actual hours worked during period: Hours Hours
		Standard full-time hours for member's position:
6.	Start date (YYYYMMDD)	End date (YYYYMMDD)
	Rate of pay	
	Regular part-time ratio during period: Percentage	Hourly Bi-weekly Semi-monthly Monthly Actual hours worked during period: Hours Hours
		Standard full-time hours for member's position: