

Check one box:  State  Teaching  Municipality

Please print clearly or type in black ink.

### Section 1: Employee Information

\_\_\_\_\_  
SSN (last 4 digits) Date of Birth (mm/dd/yyyy)

\_\_\_\_\_  
First Name MI Last Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State ZIP

\_\_\_\_\_  
Email Address Daytime Telephone Number

### Section 2: Current Employer Information and Certification

\_\_\_\_\_  
Reporting Agency Telephone Number Fax Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State ZIP

\_\_\_\_\_  
Current Employer and Position Current Contractual Salary

I hereby certify the above information to be true and correct based upon our official records.

\_\_\_\_\_  
Signature of Personnel Official Date of Signature (mm/dd/yyyy)

\_\_\_\_\_  
Email Address Telephone Number

### Section 3: Prior Employer Certification

The above employee did not contribute for the dates: \_\_\_\_\_ to \_\_\_\_\_ and wishes to purchase this time towards retirement.

Was employment seasonal or casual?  Yes  No

Did employee work at least 20 hours per week throughout the year?  Yes  No

If employment was not seasonal/casual, and employee worked at least 20 hours per week, state reason employee did not contribute. (Must be answered) Employer should be prepared to provide supporting documentation.

Dates (Please breakdown by school year for teachers/calendar year for others)		Number of Days Worked (Max 180 for teachers/260 for others)	Salary (actually earned during this period)
From (mm/dd/yyyy)	To (mm/dd/yyyy)		

## Section 4: Prior Employer Statement and Signature

I hereby certify the above information to be true and correct based upon our official records.

\_\_\_\_\_  
Signature \_\_\_\_\_  
Date of Signature (mm/dd/yyyy)

\_\_\_\_\_  
Print Name \_\_\_\_\_  
Title

Return the completed form to the address below. Incomplete or inaccurate forms will not be processed:

**Employees' Retirement System of Rhode Island**

50 Service Avenue, 2nd Floor  
Warwick, RI 02886-1021

**Office:** (401) 462-7600 | **Fax:** (401) 462-7691  
**Email:** [ersri@ersri.org](mailto:ersri@ersri.org) | **Website:** [www.ersri.org](http://www.ersri.org)