

PEI School Boards Notice of Terminated Employee

Please return completed form to:

Pensions & Benefits
Attn: Audrey Paynter
PO Box 2000
Charlottetown, PE C1A 7N8
Fax: (902) 620-3096

This form should be completed when an employee comes to the end of:

- a. a fixed-term contract,
- b. employment for retirement purposes, or
- c. employment for other reasons.

EMPLOYER TO COMPLETE

Last Name		SIN	
First Name		Employee ID	
Teachers' Superannuation Fund (TSF) <input type="checkbox"/> Regular <input type="checkbox"/> Excluded Personnel		Civil Service Superannuation Fund (CSSF) <input type="checkbox"/> Excluded Personnel	
<input type="checkbox"/> Eastern School District <input type="checkbox"/> Western School Board <input type="checkbox"/> French School Board			
School Name		School Code	
Standard Year	<input type="checkbox"/> 10 month <input type="checkbox"/> 12 month		
Member's Date of Termination (dd-mmm-yyyy)			
Reason for Termination	<input type="checkbox"/> Fixed-Term Completed <input type="checkbox"/> Retirement <input type="checkbox"/> Other _____		

Comments:

Completed by: _____ **Date:** _____

For Pension Office Use Only

Status Updated To: _____ Ent'd By: _____ Date: _____

Status Updated To: _____ Ent'd By: _____ Date: _____

Status Updated To: _____ Ent'd By: _____ Date: _____