

**MONROE COUNTY EMPLOYEES RETIREMENT SYSTEM
APPLICATION FOR PURCHASE OF
COMPREHENSIVE EMPLOYMENT TRAINING ACT (CETA)
AND/OR
THE EMERGENCY EMPLOYMENT ACT (EEA)
SERVICE TIME**

**TO: MONROE COUNTY EMPLOYEES RETIREMENT SYSTEM
C/O HUMAN RESOURCES DEPARTMENT**

I hereby apply to purchase prior CETA/EEA service time:

NAME: _____ Department _____

ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NO. _____

DATE OF HIRE WITH COUNTY: _____

DATES OF CETA/EEA SERVICE: _____

LENGTH OF CETA/EEA SERVICE I WISH TO PURCHASE: _____ years _____ months

I understand that the cost of such service credit shall be "5%" of my "annual compensation"* (*as defined by the Retirement System Ordinance for the 12 month period immediately preceding and including the date of application) multiplied by the period of credited service being purchased.

I have not nor will not use this service credit for purposes of obtaining or increasing a benefit from another federal, state or local publicly supported retirement system.

It is my intention to purchase said service credit through (Please check payment method):

_____ Single Lump-sum Payment

_____ Payroll Deduction Over _____ Months*
(*Period may not exceed time being purchased)

SIGNATURE

DATE

PHONE NUMBER

TO BE COMPLETED BY THE HUMAN RESOURCES DEPARTMENT

ANNUAL COMPENSATION*: _____ times _____ % = _____ times length of
service to be purchase _____ years/months = \$ _____.

EFFECTIVE DATE: _____

I hereby certify that the above applicant is eligible to apply to purchase CETA/EEA service time credit.

SIGNATURE