



British Columbia Teachers' Federation

100-550 West 6th Avenue, Vancouver, BC V5Z 4P2 • 604-871-2283, 1-800-663-9163 • www.bctf.ca
TTY 604-871-2185 (deaf and hard of hearing)

F03-36/Rev. September 2008

SALARY INDEMNITY PLAN

Application for withdrawal from the Long Term section of the Salary Indemnity Plan

Name _____ SIN: _____

Birthdate _____ School district _____ Local Association _____
(year/month/day)

Home address _____

City _____ Postal code _____ Home phone no. _____

Regulation 1.3

A member who has attained age 64, has reached the factor "88", or, is in receipt of a retirement pension under a registered pension plan, may voluntarily withdraw from the long term section of the plan. Withdrawal may be made during any school year in which one of the foregoing conditions has been met and upon the completion of the appropriate withdrawal form (obtained from the plan administrator). Withdrawal will be effective, upon approval, in September for applications submitted in that month, and applications submitted later will be effective the month following approval of the application.

I wish to voluntarily withdraw from the long-term section of the Salary Indemnity Plan based on one of the following:

I am 64 years old, as of _____

I have reached "factor 88"

I am in receipt of a retirement pension under a registered pension plan

I understand that if I voluntarily withdraw from the SIP:Long-term, I will no longer be required to make contributions and I hereby release the BCTF SIP:Long-term, their officers, employees and agents from any obligation for further claim or demand for monetary loss, or any further relief whatsoever under the BCTF SIP:Long-term plan. I consent to the BC Pension Corporation disclosing personal information about me to the BCTF respecting my participation in the Teachers' Pension Plan, including employer reported information respecting service and salary. I understand that this information will be disclosed to the BCTF to allow the BCTF to assist determining eligibility for Salary Indemnity Plan Long-term benefits or withdrawal from Salary Indemnity Plan Long Term contributions. I understand that my contributory service in another teachers' pension plan is fully recognized by the Salary Indemnity Plan but if transferred to the BC Teachers' Pension Plan may be prorated.

Signature

Date

Note: The Plan requires a signed original application (**facsimile copies are not acceptable**).

Mail to Salary Indemnity Plan, BCTF and enclose photocopies of:

1. birth certificate or government identification for proof of age
2. proof of contributory service in B.C. such as a Teachers' Pension Plan Member's Benefit Statement
3. proof of contributory service in a province with a reciprocal agreement, if applicable, or
4. proof of benefits from a registered pension plan, if applicable.

Date received by BCTF Income Security

For office use only (Attach copy of calculation formula.)

Approved: _____ Denied: _____ Date: _____

Effective date of withdrawal: _____ Signature: _____

Existing file: _____ File stamped: _____
(previous claims, rehab., etc.) (or microfiche update)





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F03-36/Rev. March 2009

Dear Member,

As requested, attached (overleaf) is an application form for withdrawal from the long term section of the Salary Indemnity Plan.

The Salary Indemnity Plan provides that a member who has either attained the age of 64, has reached “factor 88,” or, is in receipt of a retirement pension under a registered pension plan, may voluntarily withdraw from the long term section of the plan.

If one of the foregoing conditions occurs during a school year, you may apply to withdraw at any time during that school year. Applications received in September will be effective September 1. Applications received in other months will be effective the first day of the following month or the first day of a subsequent month, if so requested.

To speed this application, please enclose a copy of:

1. birth certificate or government identification for proof of age
2. proof of contributory service in BC such as a Teachers' Pension Plan Member's Benefit Statement
3. proof of contributory service in a province with a reciprocal agreement, if applicable, or
4. proof of benefits from a registered pension plan, if applicable.

In making application for withdrawal, you should ensure that in the event of serious illness or accident you have sufficient accumulated sick leave which, when combined with 120 days of benefit from SIP:Short term, will protect your salary to the end of the month in which you reach factor “90” or the end of the month you attain age 65, whichever comes first.

Please note:

As per the *Salary Indemnity Plan—Regulation 21—Duration of benefits*, members are not eligible for long-term disability coverage beyond the end of the month they reach “factor 90,” or the end of the month they attain age 65. Therefore, please ensure to complete this application to withdraw from the long-term portion of the Salary Indemnity Plan, if either of these apply to you.

If you have any questions, please phone the Income Security Division at the BC Teachers' Federation.

Please mail your application to the Salary Indemnity Plan, BCTF.

ISD08-0028

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