



KPERS-67PS Rev. 1/13

## APPLICATION TO PURCHASE SERVICE CREDIT – NON-KPERS

Non-federal public employment, out-of-state teaching, Peace Corps and VISTA service

■ **Important** – This form is the first step for active members who are applying to purchase service credit for non-federal public employment, out-of-state teaching, Peace Corps or VISTA service. KPERS will notify you of the cost based on your age and current salary (or current final average salary, if higher), and you can decide whether to purchase the service. To verify your previous service, you must forward this form to your former public service employer to complete Part C. If you are applying to purchase service with more than one former employer, complete separate forms for each one.

■ **Contact Us – toll free:** 1-888-275-5737 • **phone:** 785-296-6166 • **fax:** 785-296-6638  
**e-mail:** kpers@kpers.org • **web site:** www.kpers.org • **mail:** 611 S. Kansas Ave., Suite 100, Topeka, KS 66603

### ■ Part A – Member Information

1. Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
2. Name (First, MI, Last): \_\_\_\_\_
3. Full name at the time service was performed, if different from above: \_\_\_\_\_
4. Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_
5. Telephone Number: (\_\_\_\_) \_\_\_\_\_
6. E-mail Address: \_\_\_\_\_
7. Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_
8. Number of Years to Be Purchased: \_\_\_\_\_
9. Rate:  1 percent  1.75 percent
10. Type of Purchase:
  - Out-of-State Non-Federal Public Service (includes Peace Corps Service)
  - In-State Non-Federal Public Service (includes VISTA Service)
  - Out-of-State Public School or Overseas Teaching Employment
11. Method of Purchase (choose either lump sum or payroll deduction)
 

<b>Lump Sum</b> <input type="checkbox"/> Personal Check or Money Order <input type="checkbox"/> Rollover <input type="checkbox"/> Trustee-to-Trustee Transfer <input type="checkbox"/> Discover Card	<b>Payroll Deduction</b> <input type="checkbox"/> Qtr. per Qtr. (one additional quarter each quarter) <input type="checkbox"/> 2 Qtrs. per Qtr. (two additional quarters each quarter)
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12. Former Employer: \_\_\_\_\_
13. Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_
14. Length of Service (mo/yr to mo/yr): \_\_\_\_\_
15. I am currently or I will be receiving a retirement benefit from service credited with my former retirement plan:  Yes  No

"I understand if I select a purchase by *payroll deduction*, the selection cannot be revoked and only one application can be submitted at a time. If I select a purchase by *lump sum*, the selection is void if payment is not made within 45 days of notification of the purchase cost. However, I may reapply at a later date and the cost will be based on my age and current salary (or current final average salary, if higher) at time of application. For either payment type, I understand the Retirement System must receive my complete payment on or before my last day on my employer's payroll."

Member Signature: \_\_\_\_\_ Month/Day/Year: \_\_\_\_/\_\_\_\_/\_\_\_\_

■ **Part B – Current Employer Information** – This section must be completed by the current employer’s designated agent.

1. Is the employee an active, contributing member? (see instructions for eligibility)  
 Yes     No; Last Date on Payroll: \_\_\_\_/\_\_\_\_/\_\_\_\_
  2. Annual Compensation: \$\_\_\_\_\_ (total compensation earned during the last 12 months or the current rate of compensation, whichever is greater)
  3. Final Average Salary: \$\_\_\_\_\_ (to be completed by KPERS)
  4. Employer: \_\_\_\_\_ 5. Employer Number: \_\_\_\_\_
- Designated Agent Signature: \_\_\_\_\_ Month/Day/Year: \_\_\_\_/\_\_\_\_/\_\_\_\_

■ **Part C – Former Employer Certification** – This section must be completed by the former public service employer. Please return the completed form to: Kansas Public Employees Retirement System, 611 S. Kansas, Suite 100, Topeka, KS 66603-3869, attn: service purchases.

**Former Public Service Employer:** We appreciate your assistance in providing the necessary information. The member named in Part A wants to purchase service credit with the Retirement System based on service with your employer. Based on your official records, the Retirement System requires the following information to verify the member’s previous service.

1. Name of Former Employee, as shown on official records: \_\_\_\_\_
2. Dates of Employment: Month/Day/Year: \_\_\_\_/\_\_\_\_/\_\_\_\_ to Month/Day/Year: \_\_\_\_/\_\_\_\_/\_\_\_\_
3. Was this employment full-time?  
 Yes  
 No; Show time percentage of employment relative to full-time: \_\_\_\_\_ percent
4. Was this employment classified as “student employment”?  
 Yes  
 No
5. Was this employment classified as “temporary”?  
 Yes  
 No
6. Is this employment credited in your retirement plan?  
 Yes  
 No
7. Name of Employer Representative (please print): \_\_\_\_\_
8. Employer: \_\_\_\_\_ 9. Telephone Number:(\_\_\_\_) \_\_\_\_\_

“On the basis of official records, I certify that the individual identified on this form was engaged in public service employment, and that said individual received pay for this service as documented by the above information.”

Employer Representative Signature: \_\_\_\_\_ Month/Day/Year: \_\_\_\_/\_\_\_\_/\_\_\_\_

# INSTRUCTIONS FOR PUBLIC SERVICE CREDIT PURCHASE APPLICATION

## ■ Part A – Member Information

1-7. Enter the requested personal information.

8. Indicate the number of years of service that you would like to purchase.

9. Select either the 1 percent or 1.75 percent rate. This rate is the value of this service in your retirement benefit calculation. Choosing the higher 1.75 percent rate increases your retirement benefit more than choosing the 1 percent rate, but also increases the service purchase cost. This rate cannot be changed later.

10. Mark one of the corresponding boxes to indicate the type of service credit you are purchasing.

**Out-of-State Non-Federal Public Service:** Includes previous non-federal governmental employment in another state. If you are purchasing Peace Corps service, attach a letter from the Peace Corps verifying your dates of service instead of completing Part C.

**In-State Non-Federal Public Service:** Includes previous non-federal governmental employment in Kansas with an employer *not affiliated* with the Retirement System. If you are purchasing VISTA service, attach a letter from VISTA verifying your dates of service instead of completing Part C.

**Out-of-State Teaching:** You may be eligible to purchase out-of-state teaching service if you were a teacher:

- In a public school system in another state.
- In a foreign teaching service in an overseas dependents' school.
- In a recognized teacher exchange program.
- In any program where you were chosen by the Kansas Department of Education to teach in a foreign country.

11. Mark the corresponding boxes to indicate the payment method for your service purchase. You may combine more than one lump-sum payment method, but you cannot combine a lump sum and a payroll-deduction method. **IMPORTANT:** For all payment types, the Retirement System must receive your complete payment on or before your last day on your employer's payroll.

**Lump Sum:** KPERS will send a lump-sum *Cost Letter* to your designated agent. KPERS must receive a lump-sum payment within 45 days of the *Cost Letter* date or the application to purchase public service credit becomes void.

**Rollover:** KPERS can accept money from an eligible retirement plan or individual retirement account (IRA), provided the money consists of pre-tax contributions and is an eligible rollover distribution. KPERS will include a Service Credit Purchase via Rollover form (KPERS-67R) with your *Cost Letter*.

**Trustee-to-Trustee Transfer:** KPERS can accept money from a 457(b) governmental plan and a 403(b) plan to purchase permissive service credit. KPERS will include a Service Credit Purchase with a Trustee-to-Trustee Transfer form (KPERS-67T) with your *Cost Letter*.

**Discover Card:** Discover Card payments can be made at the KPERS office, or contact our office for other options. Credit card payments will include an additional surcharge.

**Payroll Deduction:** KPERS will send a payroll deduction form to you through your designated agent. This form explains the payroll deduction process in detail. You and your designated agent must sign and return the form within 21 days to complete the purchase agreement. Payroll deductions are in addition to your regular contributions. If you end employment during a payroll deduction purchase, you must submit lump-sum payments for remaining service on or before your last day on payroll.

12. Enter the name of your former employer.

13. Enter the mailing address of your former employer.

14. Indicate the dates of the service that you are applying to purchase.

15. Mark the corresponding box to indicate whether this service is credited in your former retirement plan. **Lump Sum:** If the service is credited in another retirement plan, you must have five years of participating service with KPERS (cannot include military service). In addition, the service purchase cannot exceed five years. There are no similar restrictions for payroll deduction.

16. Read and understand the statement. Sign and date the form.

■ **Part B – Current Employer Information** – This section must be completed by the current employer’s designated agent.

1. Verify that the member is an active, contributing member of the Retirement System. If the member is not active, the member is not eligible to purchase service. Members who end employment during a payroll deduction purchase may apply to purchase the remaining service by lump sum and submit the lump-sum payment on or before their last day on payroll.
2. Complete for any lump-sum purchase request. Annual compensation means the total compensation **earned** in the 12-month period immediately before the current month **or** the current annual rate of compensation, whichever is higher. Include all compensation subject to KPERS contributions.
3. The service purchase cost will be based on the *higher* of the member’s current annual compensation or current final average salary. KPERS staff will complete this item.
- 4-5. Enter the employer’s name and (4) four-digit identification number. State agencies, enter the state agency number preceded by the capital letter “S.” The Retirement System will accept only the designated agent’s signature on file or an authorized representative whose signature is also on file.