



IMPORTANT

College Pension Plan Enrolment Eligibility CE, DE and Invigilators

An employee who has the option to enrol but chooses not to, must sign a pension waiver or he/she will be automatically enrolled (per pension enrolment rules)

The *Public Sector Pensions Plan Act* and the *College Pension Plan Regulation* govern the requirements for enrolment in the College Pension Plan. For employees hired after September 1, 1999, optional enrolment criteria is as follows:

OPTIONAL ENROLMENT

If you are an employee in a **non-permanent position** (e.g. temporary, term, non-regular, contract), enrolment is **optional** until the date at which your earnings in a calendar year meet or exceed 50% of the year's maximum pensionable earnings (YMPE) as established by the Canada Pension Plan.

(1) If you choose to enrol in the pension plan, complete the enclosed "**College Pension Plan Enrolment Form**" and return it to Continuing Studies with your contract immediately.

OR

(2) If you choose **not to enrol** in the pension plan at this time, complete the attached "**Waiver of Pension Coverage**" form and return it to Continuing Studies with your contract immediately.

To indicate your choice, you must complete and return EITHER the (1) enrolment or (2) waiver form to Continuing Studies with your contract.

Once enrolled in the pension plan, your contributions will continue regardless of any change in your employment status (e.g. full-time to part-time, permanent to non-permanent) until termination of employment.

*Subject to change

If you require assistance or clarification, please contact **Charlene Cornett**, Pension & Benefits Coordinator in Human Resources at 762-5445 extension 4603 or the **College Pension Plan** toll-free at 1-888-440-0111.

For additional information, please visit the **College Pension Plan website** at www.cpp.pensionsbc.ca.



COLLEGE PENSION PLAN ENROLMENT FORM

**Please complete and return form promptly to
Continuing Studies with each CE, DE or Invigilator Contract**

Okanagan College, 1000 KLO Road, Kelowna, BC V1Y 4X8

Last Name:		Given Name(s):		Social Insurance No.	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Employee ID # (if known):		Date of Birth: (YYYY/MM/DD)	
Employee Mailing Address: (include street, city/town, province and postal code)					
Employee Home Phone: (include 10 digits)					
Are you currently in receipt of a pension benefit from the College Pension Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, you will continue to receive your pension and cannot enrol or contribute to the Plan.					
Spouse/Partner Last Name:		Spouse/Partner Given Name(s):		Spouse/Partner Date of Birth: (YYYY/MM/DD)	
Complete a "Nomination of Beneficiary Form" ONLY if you do NOT have a spouse/partner <u>OR</u> if you wish to name a beneficiary other than your spouse/partner. Form available on-line at www.cpp.pensionsbc.ca.					
Employee's Signature:				Date Signed: (YYYY/MM/DD)	
Employee Group (check applicable): <input type="checkbox"/> Admin <input type="checkbox"/> Faculty <input type="checkbox"/> Vocational <input type="checkbox"/> CE, DE &/or Invigilator					
HUMAN RESOURCES USE ONLY					
Employee Group: 10GENERL		Original Hire Date:	Current Hire Date:	Contribution Start Date:	
Organization Name: Okanagan College		Org ID 001799		Date Processed:	
Distribution: <input type="checkbox"/> Pension Plan <input type="checkbox"/> Payroll / Personnel File				Initial	