



**The United Church of Canada**  
**L'Église Unie du Canada**  
**Ministry and Employment Unit**  
 3250 Bloor St. West, Suite 200  
 Toronto, ON M8X 2Y4

Office of / Bureau de la  
**vocation**

## PR443: Application to Receive Pension Benefit Payments

### Processing/Routing

- Complete the form and email it to [officeofvocation@united-church.ca](mailto:officeofvocation@united-church.ca) and [pension@united-church.ca](mailto:pension@united-church.ca).
- The Office of Vocation has a responsibility to share this information with your regional council.
- *Please keep a copy for your own records.*
- *Thank you for printing clearly; this allows forms to be saved as digital records.*

### A. Identification of Ministry Personnel

Name: \_\_\_\_\_ Pension number: \_\_\_\_\_

Home address: \_\_\_\_\_  
Post office box/street address City Province Postal code

Telephone: \_\_\_\_\_  
Home Cell

E-mail: \_\_\_\_\_

Minister type:  Designated Lay Minister  Diaconal  Ordained

Regional council: \_\_\_\_\_

### B. Details of Application

Last date of work (including paid vacation): \_\_\_\_\_  
Year Month Day

Date pension payments to begin: \_\_\_\_\_  
Year Month Day

### C. Certification

I certify that (by selecting the boxes that apply to your current situation):

- I will cease to be employed as of the date I have requested that my pension benefits begin.
- I will begin pension benefits on December 1 of the year I turn 71 and remain in my current position.
- I am aware that if I am planning to be a re-engaged pensioner who is drawing from my pension and serving in an appointment:
  - that there will be a period of at least 13 continuous weeks between the effective date of the first pension payment and the date of entering into a subsequent appointment;
  - that there be no discussion or consideration of any return to work until after my retirement date;
  - even then only on terms and conditions that are substantially different from those terms that applied prior to my retirement.

\_\_\_\_\_  
 Signature of Ministry Personnel

\_\_\_\_\_  
 Year

\_\_\_\_\_  
 Month

\_\_\_\_\_  
 Day

*For any questions, contact the Benefits Centre at 1-855-647-8222.*

The use, retention, and disclosure of personal information collected from this form is done in compliance with privacy legislation and adheres to the principles of the *Personal Information Protection and Electronic Documents Act* (2000, c.5).

**\* THIS FORM IS NOT VALID IF ALTERED \***