

Application For Purchase Of Service Credit Military Service

Member to mail completed form to address below

Please print or type clearly and complete with black or blue ink only.

Your application will be rejected if the NMERB receives a copy, email, fax, and/or the form contains white-out.

MEMBER INFORMATION

Name (First, Middle, Last)			Last 4 digits of SSN		Gender	
			XXX-XX-		М	F
Mailing address				Email address		
City	State	Zip		Phone (include	e area coo	de)

□ I wish to *purchase* active duty military service. I have previous active duty service (prior to NMERB) A member may purchase up to 5 years of active duty military service credit. Service years to be purchased: ______ (example: 1.25, whole or quarter years only in decimal form).

□ I wish to *receive* active duty military service. I have active duty (served/earned) while working for an NMERB covered entity.

Military Service Information

٠	I was an employee of and	ersonal	servi	ce on						
	Name of Employer	Name of Employer								
	, to enter a uniformed service of the United States, w Date (mm/dd/yyyy)	/ith								
	Date (mm/dd/yyyy)	Brand	anch of Military							
	because of a call to duty, deployment, peacekeeping mission or other de	because of a call to duty, deployment, peacekeeping mission or other declared national emergency.								
•	I entered Military Service onand received an honorab Date (mm/dd/yyyy)	and received an honorable discharge effective			VC Date (mm/dd/yyyy)					
	Date (mm/dd/yyyy)									
•	• I did not voluntarily re-enlist after the initial term of my military service.									
•	• I remained employed with my NMERB Employer during my period of servi	ce in the military.	Yes	No	Not applicable					
•	I resumed providing personal service as an employee to the	(on		<u> </u>					
	Name	e of Employer	Da	ite (mm	/dd/yyyy)					
•	I am not using this period of active duty to obtain or increase a benefit fro	am not using this period of active duty to obtain or increase a benefit from the Public Employees Retirement								
	Association (PERA) or any other New Mexico state retirement system. I have	ave PERA service:	Yes	No						
	 Enclose a complete copy of your entry and discharge papers (DD214) showing honorable discharge. Keep a copy of this application for your records. 									
N	MEMBER DECLARATION									
۱۱	I hereby declare that all the information provided on this page is true and cor	nplete to the best of	f my kno	wled	ge.					
	<u>X</u>									

Member's signature

New Mexico Educational Retirement Board (NMERB) 8500 Menaul Blvd. NE, Suite B-450, Albuquerque, NM 87112 Date (mm/dd/yyyy)