



## CERTIFICATION OF PAST PERIOD OF ABSENCE

### PART 1 — Completed by Member/Applicant *(Please see Certification Form Instructions on other side)*

Please evaluate my eligibility for establishing retirement credit for a past period of absence. I understand I am not obligated to make payment for all, or any, of this credit; however, if payment is made, this form will certify that I am not receiving, nor will I be eligible to receive, a retirement benefit from another retirement program, other than Social Security, based on this same period of absence.

Member's name \_\_\_\_\_ STRS Ohio account no. \_\_\_\_\_  
 or  
 Address \_\_\_\_\_ Social Security no. (last four digits) \_\_\_\_\_  
Street  
 \_\_\_\_\_  
City State ZIP code  
 Phone (\_\_\_\_\_) \_\_\_\_\_  
Area code  
 Email address \_\_\_\_\_ Date \_\_\_\_\_

### PART 2 — Completed by Employer Who Granted Period of Absence\* *(Please return form to member)*

This is to certify that \_\_\_\_\_ Social Security no. (last four digits) \_\_\_\_\_  
Applicant's name  
 was on an absence approved by the \_\_\_\_\_  
Board of education, institution or university  
 for the purpose of \_\_\_\_\_  
 beginning \_\_\_\_\_ and ending \_\_\_\_\_  
Month Day Year Month Day Year  
 \_\_\_\_\_ Date \_\_\_\_\_  
Print name and title

Contract amount for year in which leave begins: \$ \_\_\_\_\_

*\*If the member submits payment for all or a portion of an eligible period of absence, STRS Ohio will bill the employer who granted the leave for the employer contribution portion of the amount purchased. Each leave period must be completed on a separate form. For example, if a two-year leave was granted, the dates of the leave would be listed on one form. However, if two one-year leaves were granted, each leave would be listed on a separate form.*



# CERTIFICATION FORM INSTRUCTIONS

## Certification of Past Period of Absence

The Revised Code provides for periods of absence due to the member's own illness, injury or leave granted for education, professional or other purposes. Ohio law allows members to make payment for past periods of absence. This form is to be used to certify a member's past period of absence from a teaching position at a public school or a partially paid professional leave from a college or university in Ohio. A past period of absence means the individual did not complete deposits with an employer before June 30 of the year in which the absence or leave occurred.

### Certification of Past Period of Absence

- **Part 1 — Completed by the member/applicant**
- **Part 2 — Completed by the employer who granted the period of absence.** Each leave period must be completed on a separate form.

### Submitting Online

- Open the document on your desktop computer. (For best results, open the document using Adobe Acrobat Reader 8.0 or later.)
- Save it to your computer.
- Complete Part 1 of the form and save again.
- Email the form as an attachment to the employer who granted the period of absence.
- Instruct that individual to complete Part 2 and email the form as an attachment to both you **and** forms@strsoh.org.
- STRS Ohio will send a confirmation email within one business day after the form is received.

### Submitting by Mail

- Complete Part 1 of the form.
- Send the form to the employer who granted the period of absence.
- Instruct that individual to complete Part 2 and return the form to you.
- Copy the form for your records.
- Return the original copy of the completed form to STRS Ohio.
- STRS Ohio will send a confirmation letter after receiving the form.

### Further Information

Further details are available in the *Purchasing Service Credit* brochure or the *Purchasing Service Credit Fact Sheet for Current and Past Leaves of Absence and University Leaves*.