

# **Transitional Participation Enrollment**

### PASTOR'S PARTICIPATION

Use this form to continue Benefits Plan participation when you are temporarily unemployed and actively seeking church service; enrolled for full-time, church-related postgraduate studies; or subject to a disciplinary process.

Benefits continuation through transitional participation coverage is available for up to 24 months for ministers previously enrolled in Pastor's Participation and graduated seminary students.

#### **Verification requirements**

The appropriate written verification must be received to activate coverage.

Your presbytery must provide written verification that you are unemployed and include the reason for unemployment (e.g., you are seeking a church-related service, a full-time student, or currently under discipline). If you are a postgraduate student, you will also need to submit written verification from the school that you are a full-time student in an advanced degree program.

Member information			
Name			
Last 4 digits of SSN		Birth date (mm/dd/yyyy)	
Address			
City		State ZIP	
Daytime phone Email			
Is your spouse also a member of the plan as a result of his/her employment? $\Box$ Yes $\Box$ No			
Check status under which you will continue plan participation:  ☐ temporarily unemployed or graduated from seminary and seeking church service ☐ enrolled for full-time church-related postgraduate studies ☐ subject to a disciplinary process leading to leave from employment or unemployment			
You may only continue benefits in effect on the date your employer-paid benefits ended. You may not continue Retirement Savings Plan contributions and supplemental disability coverage when not employed in eligible church service.			
Transitional Participation Coverage			
Check each benefit you want to continue:			
☐ Medical* (select coverage level) ☐ Member-only ☐ Member + Spouse ☐ Member + Child(ren) ☐ Member + Family			
☐ Defined benefit pension			
□ Death and disability*  * If you meet the Rule of 70 and elect not to continue medical and/or death benefits coverage, you may lose the opportunity to enroll for continued medical coverage and lose your eligibility for retiree death benefits upon retirement.			
☐ Temporary disability			
☐ Dental (select coverage level)			
☐ Member-only ☐ Member + Spouse ☐ Member + Child(ren) ☐ Member + Family			
□ Supplemental death coverage** (may be continued if death and disability coverage continues; check all that apply) □ Member □ Spouse □ Child(ren)  ** Supplemental death coverage must be continued during a gap in service of three months or less to continue the same level of coverage into the new service.			
☐ Vision eyewear (select coverage level) ☐ Member-only ☐ Member + Spouse ☐ Member + Child(ren) ☐ Member + Family			

Complete and mail this form along with your initial payment to: The Board of Pensions of the Presbyterian Church (U.S.A.)

2000 Market Street, Philadelphia, PA 19103-3298 **Note:** Transitional participation coverage cannot take effect until the Board receives your initial payment. Questions? Call the Board at 800-773-7752 (800-PRESPLAN) or send an email to memberservices@pensions.org



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Participation basis	
Select a salary participation basis for benefits selected. Dues are billed monthly in advance as a percentage of the basis you select.*	
☐ current congregational ministers' median	
☐ last effective salary in the Board's records (subject to the minimums and maximums determined annually)	
* Medical dues for seminary graduates are based on the minimum annual dues for medical.	

#### **Authorization**

I understand that transitional participation coverage is for currently covered ministers in Pastor's Participation who are actively seeking church service following termination of eligible service, enrolled full-time in church-related postgraduate studies, or subject to a disciplinary process that resulted in unemployment; or graduated seminary student members who are seeking church service and do not have an unpaid balance from a prior period on a self-paid status.

I understand that my transitional participation coverage will not take effect until the Board of Pensions receives my initial payment.

I also understand that my transitional participation coverage will not be activated until verification from the presbytery and/or school, if applicable, is received by the Board of Pensions.

Signature (required) Date (mm/dd/yyyy)

NOTE: Coverage will be suspended if you do not pay your dues in full by the due date. If two consecutive payments are missed, the Board will terminate coverage with no opportunity for reinstatement.

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