



APPLICATION FOR RETIREMENT CREDIT FOR EDUCATIONAL LEAVE OF ABSENCE

PART I: To Be Completed By The Employee:

I, _____, residing
at _____
_____ understand
that in order to be eligible to establish retirement credit for an educational leave of absence, I must obtain the approval of my employer and the Board of Trustees of the Tennessee Consolidated Retirement System and that I must make the necessary contributions, if required, to establish such service.

Explain the nature of the leave and how it relates to your employment:

Date Employee's Signature

PART II: To Be Completed By The Employer:

Employee's Position Prior To Leave \$ _____
Annual Salary Prior To Leave

I hereby certify that said employee has/had approval of _____ to take
educational leave of absence for the purpose of engaging in academic research related to his/her employment and whose
leave is intended to increase his/her efficiency as an employee, beginning _____ and continuing
through _____ and to make monthly contributions, if required, to the retirement system for this
leave. If needed, the employee is to make financial arrangements with the employer for the monthly contributions.

Date _____
Month Day Year Signature of Department Head

Date _____
Month Day Year Signature of Budget Director

PART III: For Retirement Use Only:

The aforementioned employee has been approved to make contributions for retirement credit while on this educational leave.

Date _____
Month Day Year Signature of Prior Service Counselor

Date _____
Month Day Year Signature of Supervisor of Prior Service