****

**College of Applied Arts & Technology Pension Plan (CAAT Pension Plan)
OTRFT (Other Than Regular Full-Time) Contract**

As a College employee you are eligible to join the CAAT defined benefit pension plan. Please visit the Plan’s website (www.caatpension.on.ca) for details about the Plan, how you may join, and factors to consider before joining.

**Documentation:**

* Member’s handbook – (https://caatpension.on.ca/en/members/member-handbook)
* Enrolment form – (https://caatpension.on.ca/en/members/part-time/part-time-info-kit)

**Options:** Elect one option and place your initials by the appropriate box

**□** **I elect to become a member** of the Colleges of Applied Arts & Technology Pension Plan. My completed and signed enrolment form is attached to this contract.

**□** I have received information with respect to my right to become a Member of the

Colleges of Applied Arts & Technology Pension Plan, and by signing this offer letter, I confirm that **I do not wish to become a member at this time**. I understand that if I apply to become a Member at a later date, it will be under the terms of the Plan in effect at that time. If I am eligible to join when I apply, my membership will be effective from my enrolment date and will not be retroactive.

**□** I have made pension contributions in the past at this College or at another College.
 Name of College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**□** I am a College Retiree in receipt of pension benefits, therefore I can’t join unless I stop my monthly CAAT Pension payments.

**End of contract – General statement and employee’s signature – ADD TO CURRENT STATEMENT**

I hereby accept employment on the terms and conditions noted herein and I confirm my election/the information provided with respect to the CAAT Pension Plan, above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Print Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date