



Teachers' Retirement System of Louisiana

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Form 8BT (08/07)

03-8BT

Application for Purchase of Refunded Service to Transfer

Print in ink or type all entries except signatures. Application should be received by the Teachers' Retirement System of Louisiana (TRSL) at least six months in advance of applying for retirement or DROP. Complete this form in its entirety to allow a thorough microfilm search for refunded records to be made. All refunded service must be restored in order to transfer.

Incomplete or improperly certified forms are not acceptable for evaluation by TRSL and will be returned directly to the applicant.

Name: Last, first, MI, suffix (Jr., III, etc.)
Street / P.O. Box
City, state, zip
Social Security number
Date of birth (mm-dd-yyyy)
Daytime telephone
Evening telephone
E-mail address

Name(s) under which service was rendered if different from above:

Period of time refunded (approximate dates are acceptable):

From To Approximate date of refund
mm-yyyy mm-yyyy mm-yyyy

Please indicate the position(s) the member previously held during the above-referenced period of employment:

Table with 4 columns: Position, Years employed, Employer, For TRSL use only. Rows include Teacher, professor, instructor; Custodian, school bus driver; School food service; Other.

Name of Louisiana retirement system to which applicant is currently contributing:

Applicant's signature (Do not print or type)
Date signed (mm-dd-yyyy)

The member should contact the retirement system to which he or she is currently contributing for information regarding the transfer or reciprocity of this period of employment.