

# WORCESTER RETIREMENT SYSTEM

ROOM 103 • CITY HALL • WORCESTER MA 01608-1811 • PHONE (508) 799-1062

## *REQUEST TO PURCHASE CREDITABLE SERVICE (BUYBACK)*

PLEASE COMPLETE THIS FORM TO PURCHASE RETIREMENT SERVICE TIME

NAME (please print): \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Number & Street: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Agency Employed now: \_\_\_\_\_

Start Date: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

If you worked under another name, please advise: \_\_\_\_\_

### SERVICE YOU WISH TO PURCHASE

Agency where employed	Dates of Service	Was Service Refunded?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature \_\_\_\_\_

Date \_\_\_\_\_

If planning to retire please give approximate date: \_\_\_\_\_

[Print Form](#)