



Mail Completed Forms to:  
30-30 47th Avenue, 10th Fl  
Long Island City, NY 11101



NYCERS USE ONLY

F246

## Application to Purchase Service for Child Care Leave Tier 1, Tier 2 and Tier 3 Correction Members

This application is for Tier 1, Tier 2 and Tier 3 Correction members who wish to purchase service for time spent on child care leave. In order to purchase this time you must complete this form, sign it and return it to NYCERS. Upon receipt of this application, NYCERS will verify any claim with the Department of Corrections. To be eligible to purchase previous service, you must currently be in active service. Please be sure you read and understand this form.

**NOTE: If the address you provide on this form is different from your address in NYCERS' system, the new address will become your official address in NYCERS' records.**

Member Number	Last 4 Digits of SSN	Phone Number
First Name	M.I.	Last Name
Address		Apt. Number
City	State	Zip Code

**In order to purchase credit for child care leave of absence as a Correction member the following must be true:**

1) You must make claim for such credit by:

- December 31, 2004 for Tier 1 and Tier 2 members (or) within 90 days of termination of the child care leave (whichever is later); **OR**
- December 31, 2005 for Tier 3 members (or) within 90 days of termination of the child care leave (whichever is later). **Under Chapter 710 of the Laws of 2023, Correction Force 22-Year Plan members are now eligible to purchase child care leave. For Correction Force 22-Year Plan members, this law became effective December 8, 2023.**

2) You must pay an amount equal to what your required contributions would have been during this child care leave (plus accrued interest);

3) The service credit shall not exceed a maximum of one year for each period of authorized child care leave.



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**CHILD CARE LEAVE OF ABSENCE:**

**FROM [MM/DD/YYYY]**

**TO [MM/DD/YYYY]**

**AGENCY**

/	/
/	/
/	/

/	/
/	/
/	/

NYC Department of Correction
NYC Department of Correction
NYC Department of Correction

**Signature**

**Date**

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**This form must be acknowledged before a Notary Public or Commissioner of Deeds.**

State of \_\_\_\_\_ County of \_\_\_\_\_ On this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, personally appeared before me the above named, \_\_\_\_\_ to me known, and known to me to be the individual described in and who executed the foregoing instrument, and they acknowledged to me that they executed the same, and that the statements contained therein are true.

**If you have an official seal, AFFIX IT**

**Signature of Notary Public or Commissioner of Deeds** \_\_\_\_\_  
**Official Title** \_\_\_\_\_ **Expiration Date of Commission** \_\_\_\_\_

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