COVENANT PENSION TRUST
THE EVANGELICAL COVENANT CHURCH

FORM B
SERVICE RECORD

Name _____
FIRST / MIDDLE / LAST

NAME OF COVENANT CHURCH/INSTITUTION	DATE BEGAN MONTH/YEAR	DATE ENDED MONTH/YEAR	TOTAL YEARS/MONTHS

Covenant Church/Organization Employment Record

Time spent in ministry will not count toward vesting and benefit calculation total unless contributions were made to your pension account.

8303 West Higgins Road, Chicago, Illinois 60631 | PHONE: 800-313-8955 | FAX: 773-784-2249 | EMAIL: benefits@covchurch.org