



MCPS Core and Supplemental Plan Disability Forms Checklist

- MCPS FORM 455-24: *Statement of Disability and Medical Release*
- MCPS FORM 455-25: *Attending Physician's Statement* – to be completed by the attending physician and returned to the employee. Employee is to submit this form to ERSC. Physician may attach any additional documentation if necessary.
- MCPS FORM 455-23: *Preliminary Application for Disability Benefits*
- MCPS FORM 455-2A: *Request for Estimate of Retirement Benefits*
- MCPS Form 455-14: *Acknowledgement of Medicare Enrollment Requirements for All Disability Retirees*

All completed forms must be submitted to the following address:

**Montgomery County Public Schools
Employee & Retiree Service Center
45 West Gude Drive, Suite 1200
Rockville, MD 20850**

Employee will be notified in writing if disability benefits have been denied, deferred or approved. If approved, the employee must complete all retirement forms.