

APPLICATION TO INCREASE / DECREASE SALARY SACRIFICE

To : The Pensions Department

I confirm that I would like to increase / decrease my contributions in the Salary Sacrifice Scheme with effect from

Please refer to the table before completing the following sections of this form

My revised contribution is :%

I confirm that I wish to make a salary sacrifice of :%

I understand that my pension contribution will increase by :%

I understand the scheme represents a change in my terms of employment and should I choose to I can leave the scheme and revert back to the previous terms and conditions.

Signed:

Name :

Department :

Payroll No :

Date :

Cashiers : Please Increase / decrease the employers contributions to%

Signed :