

Pension Contribution Change Form

Academic Staff Pension Plan

Employee Number:	Surname:	First Name and Initial:
Department:	Email:	Phone:

Eligibility :

Eligible full-time Faculty Members with 20 or more years of service who are contributing at the required rate of 5.5% of pensionable earnings will attract a Western contribution of 9%. Members contributing at a required rate of 1.5% may make an irrevocable election to contribute at the required rate of 5.5%.

Contribution Change :

I hereby elect to change the rate of my required employee pension contribution to the Academic Staff pension plan from 1.5% to 5.5% of my pensionable earnings effective _____. I understand that this election is irrevocable and remains in place until termination of employment or retirement.

I further acknowledge:

- That with this election, the employer contribution rate will change from 8.5% to 9.0% if I have attained at least 20 years of Full-Time service;
- This change will not affect my current investment instructions;
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