

# The University of Manitoba Pension Plan (1993) Beneficiary, Spouse or Common-law Partner Name Change



This form is to be used when the legal name of your designated beneficiary, spouse or common-law partner has changed. Complete and submit this form to the Pension Office with your original signature.

## A | Personal Information

\_\_\_\_\_  
*Last Name*

\_\_\_\_\_  
*First Name(s)*

\_\_\_\_\_  
*Employee Number*

## B | Beneficiary, Spouse or Common-law Partner Name Change

I hereby request that my beneficiary, spouse, or common-law partner's name be changed on my current beneficiary record for The University of Manitoba Pension Plan (1993).

\_\_\_\_\_  
**Former** *Last Name*

\_\_\_\_\_  
**Former** *First Name(s)*

\_\_\_\_\_  
**Current** *Last Name*

\_\_\_\_\_  
**Current** *First Name(s)*

## C | Declaration

I hereby confirm that the above information is correct. I understand that this personal information is being collected under the Authority of The University of Manitoba Act and will be used for the purposes of pension plan administration.

I authorize The University of Manitoba to exchange personal information with benefit service providers and/or organizations who provide advice and service in the management of the group pension plans. This information is protected by the Protection of Privacy provisions of *The Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of information, contact the Access & Privacy Officer, in the Access and Privacy Office, (204) 474-8339, The University of Manitoba.

\_\_\_\_\_  
*Signature of Plan Member*

\_\_\_\_\_  
*Date (day/month/year)*

