

The University of Manitoba Pension Plan (1993) Member Name Change



This form is to be used when a member changes their legal name. Complete and submit this form to the Pension Office with your original signature.

If you are a staff member, please contact Human Resources to update your records. If you are not a current staff member please attach a copy of government-issued document(s) confirming your former and current name.

A | Personal Information

Last Name

First Name(s)

Employee Number

B | Name Change

I hereby request that my name be changed on my records 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)

