

University of Oxford Staff Pension Scheme

Investment Builder C	hoice Form	for new joiners	S		
Please complete this form in full b Pensions Office.	y using BLOCK CAI	PITALS and by ticking	the appropriate	e boxes. Plea	ase send the completed form to the
Department or College					
Personal details					
	7 .				
Title	Surname				
Forenames					
NI Number		Date of b	irth	/	/ Gender M / F
Job title					
Employee number			Date of j	oining	
Internal telephone number Email address					
understand that, if the date acceptance into membershi	of joining is lat p of OSPS may their advisers and	er than the date the be subject to certain administrators with	at my pension special ter ll need to pr	onable emems and co	rom time to time in force. I apployment commenced, my conditions. I understand that sonal data about me for the ng of this personal data.
Tier Selection					
• •	contributions fo	or the tier I select	below. I un	derstand	te of joining or the next that contributions will be is form.
I also understand that if first three months, I will					return the form after the ayslip.
	, that I will no	ot be able to cha		•	will be put into the same following April and that
Are you currently a member	of OSPS elsewhe	ere or have you been	a member of	f OSPS in	this tax year? Y/N
I wish to contribute to	Tier 3 (8%) plus	s 10% from employ	ver	Tick one box only (Your choice will not be valid if you have already contributed to a different tier in this tax year)	
	Tier 2 (6%) plus	s 8% from employe	r		
	Tier 1 (4%) plus	s 6% from employe	r		
Signed			D	ate	

APP5(DC)/Feb18 **OSPS** Reference SA