

NIGERIAN UNIVERSITY PENSION MANAGEMENT COMPANY LIMITED RETIREMENT SAVINGS ACCOUNT OPENING FORM

All fields must be filled in BLOCK LETTERS Fields marked * are mandatory.
Fields marked ** are conditionally mandatory.

A. PERSONAL DATA	
	C - 1 - 0.6/D*
Title* Mr. Mrs. Ms. Miss.	Gender (M/F)* Marital Status (M/S/D/W)*
Wil. Wils. Wils.	
Surname*	First Name*
Middle Name	Date of Birth*
Nationality*	Mother's Maiden Name
State of Origin**	LGA**
T**	Danson of Empire Address
Town**	Personal Email Address
Primary Phone Number *	Alternate Phone Number
Timary Frone Number	Atternate I note Number
Puri landial Address (New P.O. Press)	
Residential Address (Not P.O. Box)	
	
Town **	LGA** State**
Correspondence Address	
Town	LGA State
TOWN 1	
National Identity Number (NIN)	Bank Verification Number (BVN)*
National Identity Number (NIN)	Bank Vernication Number (BVN)
B. EMPLOYMENT RECORD	
Employer Code	
Name of Organisation in full *	
Office Address (Not P.O. Box) **	
Office Telephone Number	Date of First Employment * Date of Confirmation
	D D / M M / Y Y Y D D / M M / Y Y Y Y
Designation/Rank **	Staff No. / File ID *

C. REMUNERATION DETAILS (in Naira)			
Basic (N) Housing (N)	Transport (N) Other Allowances (N)		
Salary Structure (eg. CONTISS, CONUASS, e.t.c.) ** GL**	Step **		
D. MONTHLY PENSION CONTRIBUTION			
	ployer Contribution		
N K N K	Contribution Rates:		
N K Employee % Employer %			
Additional Voluntary Contribution: (%) OR N K			
E. NEXT OF KIN			
Title * Surname *	First Name *		
Middle Name Gender	(M/F) * Date of Birth		
Winder value	D D / M M / Y Y Y		
Relationship * Na	tionality *		
Phone Number Email Address			
Residential Address			
Town** LGA** State **	Country *		
How would you like to receive your vital documents (Registration Certificate, RSA Statement, e.t.c.) Select as appropriate: Email: Office: Residential Address: Hold (Don't Deliver):			
Teories and appropriate.	riota (Bont Benver).		
F. CERTIFICATION			
I hereby certify that the information provided in this form is correct. I further consent and authorize Nigeria Inter-bank			
Settlement System Plc and National Identity Management Commission be required) to the National Pension Commission (PanCom), unon	n to release my BVN and/or NIN information (as may		
be required) to the National Pension Commission (PenCom), upon request by my Pension Fund Administrator, for the maintenance and operation of my Retirement Savings Account. It is my understanding that PenCom shall exercise due care			
to ensure that my information is secure and protected.			
Passport must be on			
white background. Write name behind			
the passport.	2.1		
Affix with gum.	Signature		
DO NOT STAPLE.			
Photograph * Left Thumb Right T			
FOR OFFICE USE ONLY			
Registration Date Agent Code	Location		
D D / M M / Y Y Y Y			
Agent Name			
Reference Number			
Required Documents For Registration			
Copy of a valid identification (Natl. ID Card / Driver's License / Permanent Voters Card (PVC) / Intl. Passport).			
Copy of Staff ID, where available. Copy of Letter of First Appointment or Attestation Letter (for public sector employees).			
Copy of birth certificate or declaration of age.	emproyees).		