

State Sector Retirement Savings Scheme Contribution Change Form

Authorisation to change the amount of your employee contributions to the State Sector Retirement Savings Scheme.

1. Employee Details

Full Name: _____

Address: _____

Employer: _____

Employee Payroll No: _____

SSRSS Member No: _____

Date of Birth: _____

2. Change Regular Savings Contributions

I want to change my total employee contributions to: % of my gross base salary.
 (The minimum contribution is 1.5%. There is no maximum. Contributions must be a multiple of 0.5%).

3. Employee signature

Please sign and send to your payroll section.

If you are employed at a State or State integrated school or at a Kindergarten please send your form to:

Ministry of Education
 Retirement Savings Schemes
 PO Box 1317
 Wellington

Employee signature: _____

Date: _____

Payroll Use Only

Pay Run/Period Number _____ Date _____

Actioned/Inputted by signature _____ Date _____

Verified/Checked by signature _____ Date _____