

University of Dundee Superannuation & Life Assurance Scheme

Member-Nominated Trustee - Clerical Staff Constituency

NOMINATION FORM

PLEASE COMPLETE USING BLOCK CAPITALS

To: **The Trustees of the Scheme**
 Clerical Staff Constituency

Part 1 I would like to nominate the following person to serve as a Member-Nominated Trustee (MNT) for the **Clerical Staff Constituency**

<p>Full name of person to be nominated:</p> <p>.....</p> <p>Home address:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>I confirm that to the best of my knowledge I am eligible to become an MNT and I wish to serve as an MNT</p> <p>I am/am not a member of the Scheme</p> <p>.....</p> <p>(SIGNATURE)</p>
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I confirm that I am a Member of University of Dundee Superannuation & Life Assurance Scheme currently working within the **Clerical Staff Constituency** and wish to nominate the person named above

.....
(SIGNATURE)

.....
(FULL NAME)

.....
(DATE)

CONTD./

Part 2 FOR COMPLETION WHERE THE NOMINEE IS NOT A SCHEME MEMBER

I agree that the person named overleaf may be nominated as an MNT.

.....
Signed for and on behalf of the University of Dundee

.....
(FULL NAME)

.....
(DATE)

NOTES

A The person who is being nominated as an MNT must ensure that he or she is eligible to become an MNT. Guidance is provided in section 4 of the Announcement.

B When completed, this Form should be returned to:

The Pensions Officer
University Pensions Office
Floor 2
Tower Building
University Dundee
DD1 4HN

By: **28th February 2019**

The Pensions Officer will arrange for Part 2 to be completed if necessary.