

Dependant Nomination Form

Registration of potential dependant - Defined Benefits Section

- The Scheme Trustee, with the consent of the University, has the discretion to pay all / part of your Spouse's Pension to a Dependant other than your husband / wife / civil partner on your death.
- Use this form to nominate a Dependant to receive all / part your Spouse's Pension which may be payable if you die.
- The form is designed to help assist the Trustee to determine if a dependant pension should be payable in the event of your death and also to ensure that benefits are processed quickly and efficiently.
- The form will only be used for pension purposes, and only when necessary, in accordance with data protection requirements as summarised in the Annex.
- Please note, if you are an active member, a separate form will need to be completed in relation to your Lump Sum Death Benefit.
- Please return this form to: University of Warwick Pension Scheme, HR Pensions, Top Floor University House, Kirby Corner Road, Coventry, CV4 7AL.
- Please complete this form using BLOCK CAPITALS

Member details

Title _____ Surname _____

First names _____

National Insurance number _____

Dependant Details

Dependant means in relation to any member of the Defined Benefits Section (including a deferred member) a person who was, immediately before the member's death, (i) the member's former spouse whom the Scheme Trustees consider he supported financially, (ii) the member's domestic partner with whom the Scheme Trustees consider he is financially interdependent, or (iii) anyone whom the Scheme Trustees consider is dependent on the member, either financially or because of disability.

Please note, you do not need to register a child on this form who may be eligible to receive a pension in their own right under the Defined Benefits Section of the Rules of University of Warwick Pension Scheme.

Name _____ Relationship to member _____

Nature of dependency _____

Address _____

Please make sure you sign and complete the Declaration on page 2 of this form.

Declaration by Member

To: The Trustee of the University of Warwick Pension Scheme:

- I understand that under the Scheme Rules, the Scheme Trustee, with the consent of the University, has the discretion to pay all / part of my Spouse's Pension to a Dependant other than my Qualifying Spouse on my death.
- I understand that completion of this form is only a notification as to the identity of my Dependant and does not commit the Scheme Trustee to pay a pension to that person. I wish the Scheme Trustee to consider the person I have notified above.
- I understand that the payment of a Dependant's pension is subject to the Scheme Rules including as to whether it is payable and what conditions apply. I understand that further details are available on request from hr.pensions@warwick.ac.uk.
- In connection with the Scheme generally, or with its administration of the payment of the benefits to which this form relates, I acknowledge that the Scheme Trustee may disclose the information contained in this form to such of the Scheme Trustee's professional advisers (including administrators, actuaries, auditors and lawyers) as the Scheme Trustee decides.
- I confirm that I have read and understood the "Data Protection" section set out below before completing and signing this form.
- I understand that the information I am providing includes personal data (including sensitive personal data) regarding both me and my Dependant. I understand that the Scheme Trustee will use the above information for the purpose of processing any death benefits payable in respect of me from the Scheme.
- I also understand and acknowledge that the information that I am providing will be retained by the Scheme Trustee for as long as necessary to enable it to process any benefit payable in respect of me after my death, to deal with any queries that may arise in respect of that benefit or decisions relating to it, and in order to ensure the proper administration of the Scheme.
- I understand that if my personal circumstances change I should submit a new nomination form updating any nominations and/or notifications I wish to make. Forms may be obtained from hr.pensions@warwick.ac.uk

Name _____

Members Signature _____ Date _____

Annex-Data Protection

When completing this form, you will be providing personal information about yourself and your Dependant and this information is known as “personal data” (because it is personal information about you and/or your Dependant).

Some of the information you provide may even be “sensitive personal data” (also known as “special categories of personal data”), because it reveals information about you and/or your Dependant which is particularly sensitive. This type of information includes information about an individual’s sexual orientation or about their health conditions.

The Scheme Trustee is “data controller” of all personal data held in respect of the Scheme. The Scheme Trustee takes its obligations under the General Data Protection Regulation (GDPR) seriously and has appropriate procedures in place to ensure your personal data and rights are protected.

The information provided on this form will be used for the purpose of administering your pension. Where necessary, we may disclose this information to our appointed third parties, for example, legal advisers.

Find out more about how we collect and process your personal data, protect your privacy, and how you can contact our data protection officer, by visiting

https://warwick.ac.uk/services/humanresources/internal/rewardandbenefits/corebenefits/pensions/ups/gdpr/warwick_ups_privacy_statement_draft_082020.pdf

Please ensure that your nominated Dependant is made aware that their information will be submitted to us for these purposes and that you have shared the privacy statement with your nominated Dependant.