

DATA RECAPTURE FORM *Mandatory Field **Conditional Mandatory Field

SECTION 1: RETIREMENT SAVINGS		٥٠٠						ZEN	TIF	CA		TNL	JWIE	EK	(RS	AP	IIA)	пΟ	EDE	it S	υE	TAIL	S .
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* Title (Mr., Mrs., Miss & Ms)															Т	Т	7			*Rece (with	ent Pasa a white	sport Ph backgro	oto und)
* Surname									$^{+}$						$^{\perp}$		_]						
* First Name]						
Middle Name]		,	vritten	at the £	be bold back of t btograph	he
Maiden Name/Former Name																	_						
Mother's Maiden Name															 		_						
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*Date of Birth (DD MM YYYY) *Samp	le Dat	te 14	SEI	1 9	70	L	\perp	\perp		\perp	\perp												
*State of Origin (if Nationality is Nig	geriar	1)																					
Personal Email Address																							
*Phone No. (Country Code + Mobile N	lumbe	er)																					
*Place of Birth																							
Residential Address																							
House No./Name																							
Street																							
**Village/Town/City																							
**State of Residence																							
P.O. Box or PMB (if any)																							
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*Sector Classification 01- Public Sector												Pensi		04.6	D		I						
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*Employee Under IPPIS? Yes/N	lo					**D	ate	Jo	ine	d II	PPI	S											
Employee IPPIS No																							
Employer's Name																							
Address		Ŧ	Ŧ											T	T	T	Ŧ	$\overline{}$	Ŧ	T	$\overline{\top}$		
**Village/Town/City		$\overline{}$	\dashv	\exists										Ť	$\dot{\top}$	+	$\dot{\top}$	\pm	$\overline{}$				
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SECTION 4: NEXT OF KIN's DATA
*Gender (M/F) * Title (Mr., Mrs., Miss & Ms) * Surname * Other Names * Relationship * Telephone Correspondence Address **Location - Nigeria or Abroad Nigeria Abroad Street No & Name Town/City/Country International Mobile/Tel. Number (if any)
SECTION 5: EMPLOYEE CONFIRMATION
"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 to release my BVN and NIN information to the National Pension Commission (PencCom) 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." *Name *Signature (Please sign within the box) Date
SECTION 6: APPLICANT'S BIOMETRIC/CERTIFICATION
*Name Signature (Please sign within the box) Date Domo Y Y Y Y Y
SECTION 7: FOR OFFICIAL USE ONLY
1. Employment Letter 2. Birth Certificate or Age Declaration 3. NIMC Slip Does the Contributor /retiree have any Physical Challenge? Yes No If yes: Tick Type Partial Complete Others PRIVACY AND CONSENT NOTICE CrusaderSterling Pensions Limited (CPL) is committed to protecting your personal data disclosed to us. We will therefore ensure your data is: Processed lawfully; Collected and maintained for a specific purpose; Retained no longer than necessary, and kept securely. CPL will use the personal information you provide majorly for the purpose of Pension Fund Administration and Management. For more details, please read up our data privacy policy on http://www.crusaderpensions.com/data-privacy-policy. This policy sets out your rights under the Nigeria Data Protection Regulation 2019 and explains how you can access your personal data as well as lodge complaint if you have concerns about how we are using it. By signing this form, you agree that you understand how your data will be used and consent to its use as stated in our privacy policy. You can access, make changes to, update or withdraw your information provided to us through any of the following details: CrusaderSterling Pensions Limited

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