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| **Tir Na Nog Salary Sacrifice Scheme**  **Withdrawl Request Form** | | | | BANGOR UNIVERSITY NEW LOGO |
| Please read the schemes rules and FAQ before completing this form and then return to Tir Na Nog who will note and then share with the Bangor Benefits Team.  **Your Details** | | | | |
| First Name |  | Surname |  | |
|  | | | | |
| Department |  | Payroll No |  | |
|  |  |  |  | |
| Childs Name  (List all if applicable to more than 1) |  | | | |

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| --- | --- | --- | --- |
| **Date from which you wish the salary sacrifice payment to end:-** | | | |
| Day / Month |  | Year |  |

|  |  |  |  |
| --- | --- | --- | --- |
| ***Reason for withdrawl (select applicable)*** | | | |
|  | Leaving University Employment but child eligible to remain in nursery |  | Employee leaving University and child leaving nursery |
|  | Child leaving nursery | | |

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| **Agreement:**   * I have notified the Nursery of this change and discussed any requirements for further payment or credit owed. * I have read and understood the University guidance; * I understand that I cannot receive a refund of any salary exchange unless any credit cannot be utilised otherwise. * I understand that if a credit refund is requested and processed this will be subject to Tax and National Insurance deductions. | | | |
| Signature |  | Date |  |