

Expression of Wish form

Nationwide Pension Fund

Use this form to inform the Trustee of Nationwide's pension scheme of your wishes for the payment of the cash benefit or dependant's pension in the event of your death.

Your personal details

PLEASE USE BLOCK CAPITALS

Full name:

Address:

Personal e-mail:

Employee Number:

NI Number:

Date of birth:

Marital status:

Nomination for payment of the cash benefit

I understand that this request is not binding on the Trustee. In the event of my death, I would like the Trustee to consider making payment of any cash sums due under the 'Rules of Nationwide's Pension Scheme' to the following:

Full name:

Address:

Relationship to me:

Percentage of benefit:

Full name:

Address:

Relationship to me:

Percentage of benefit:

Full name:

Address:

Relationship to me:

Percentage of benefit:

Please refer to the notes and Data Protection Statement and sign overleaf.

Nomination for payment of the dependant's pension

I understand that this request is not binding on the Trustee. In the event of my death, I would like the Trustee to consider making payment of a dependant's pension to the following individuals:

Name of dependant:	<input type="text"/>		
Address:	<input type="text"/>		
Details of dependency:	<input type="text"/>	Percentage of benefit:	<input type="text"/>
Name of dependant:	<input type="text"/>		
Address:	<input type="text"/>		
Details of dependency:	<input type="text"/>	Percentage of benefit:	<input type="text"/>

Please refer to the notes and Data Protection Statement below and sign overleaf.

Notes

Nomination for payment of the cash benefit

You may enter the name of more than one person or organisation and the proportion you wish each to have. You can nominate more than three people if you wish – please continue on a separate sheet of paper.

You are under no obligation to give details of your relationship with any nominee. However, it may assist the Trustee in exercising its discretion when determining who is to receive the cash sum payable.

Nomination for payment of the dependant's pension

You may enter the name of more than one person and the proportion you wish each to have.

The individual(s) named need not be related to you, but must be financially dependent or interdependent upon you. If at the date of your death your nominee is not dependent or interdependent upon you (in the opinion of the Trustee), he or she will not be considered by the Trustee as a possible recipient of the dependant's pension.

For members who joined after 31 August 1998: If you are not married or in a civil partnership, you may nominate another individual to receive a dependant's pension provided he or she is financially dependent or interdependent upon you. The Trustee has discretion to pay a pension to your dependant in the event of your death. If you are living with your married or civil partner at the time of your death, a pension will be paid automatically to your married or civil partner.

Change in circumstances

In the event of any changes in circumstances, it is your responsibility to ensure that any change in your wishes is made known to the Trustee by returning a new form which will replace this form, or by giving notice of cancellation of this form. This can be done at any time.

Data Protection Statement

Please read before signing and completing this form

When completing this form, you will be providing personal information about yourself and your beneficiaries to the Trustee. Your personal information is known as "personal data" (because it is personal information about living individuals) and some of the information you provide may be "sensitive personal data" (also known as "special categories of personal data") because it relates to your relationships with other people and so could relate to your sex life or sexual orientation. If you provide any sensitive personal data about yourself and/or others when completing this form, the Trustee will need your explicit consent in order to use that sensitive personal data.

The Trustee is the “data controller” of all personal data held in respect of the Nationwide Pension Fund and, as such, is responsible for meeting certain legal requirements under data protection legislation in relation to that personal data. The Trustee (including data processors and data controllers it may use) has a legitimate interest in processing this personal information to ensure proper administration of the Nationwide Pension Fund.

All personal information received by the Trustee or its advisers will be held securely and managed in line with the requirements of data privacy legislation. The Trustee’s Privacy policy can be found through a link on the bottom of each page on the Fund website nationwidepensionfund.co.uk. This policy explains more about how the Trustee keeps your personal information safe, who the Trustee might share this information with, how long it may be held for and most importantly, your rights relating to your personal data.

Individuals have the right to withdraw consent to the Trustee using the sensitive personal data specified in this form at any time. However, if consent is withdrawn, this will not affect the processing of any personal data which took place beforehand. If you wish to exercise your right to withdraw your consent, or if you have any queries about completing this form, please contact the Pensions Team at the address below, or by email NPF@ajg.com.

Please inform any people mentioned on this form that you have passed their personal data to the Trustee, and provide them with a copy of this Data Protection Statement, so they know they can contact the Trustee if they have any concerns about the way that their personal data is being used.

Your acknowledgment and consent

I understand that the information I am providing includes personal data (possibly including sensitive personal data) regarding both me and others. I understand that this Expression of Wish form may be scanned in and held electronically or held on the secure member portal. I have informed any people mentioned on this form that their personal data is being provided to the Trustee, and I have provided them with a copy of this Data Protection Statement.

I understand that the Trustee will retain and use the above information for as long as necessary, and may share it with the Trustee’s professional advisers (including administrators, actuaries, auditors and lawyers as the Trustee decides) for the purpose of administration of my benefits and to deal with any queries that may arise in respect of those benefits or decisions relating to them.

This form cancels any previously submitted form.

I confirm that I have read and understood the information set out above before completing and signing this form and I give my consent to the Trustee to use my personal data and any sensitive personal data I have provided in line with this Data Protection Statement to the extent it is required.

Signature:

Date:

Please return to: Nationwide Pension Fund, Gallagher (Edinburgh), PO BOX 321, Mitcheldean, GL14 9BG, United Kingdom.