

Internal Correspondence

From : At :
To : General Manager At : Megawatt House
Date : Ref :

Subject: DETAILS OF MEMBER LEAVING SERVICE

First Name(s): **Surname:** **Title:**.....
Date of Birth: **I. D Number:** **Gender:**.....
E.C Number: **Date of Leaving Service:**
Date Joined Pension Fund: **Designation:** **Grade:**.....
Personal Email Add: **Personal Cell Number:**..... **Basic Salary**
Address: **Marital Status:**.....
Name of Spouse 1: **Spouse I.D Number:** **Date of Birth:**.....
Cellphone Number:..... **Email Address:**
Name of Spouse 2: **Spouse I.D Number:** **Date of Birth:**.....
Cellphone Number:..... **Email Address:**

Number of Children below 18years:

Names of Children	Date of Birth	Birth Entry/ID

REASON FOR EXIT

- | | |
|--|--|
| 1. Retirement
a. Early retirement <input type="checkbox"/>
b. Normal retirement <input type="checkbox"/>
c. Late retirement <input type="checkbox"/>
d. Medical retirement <input type="checkbox"/> | 2. Withdrawal (Resignation & Dismissal)
a. Refund Employee contribution & Preserve Employer contribution <input type="checkbox"/>
b. Refund Employee contribution & Transfer Employer contribution <input type="checkbox"/>
c. Preserve both Employee & Employer contributions <input type="checkbox"/>
d. Transfer both Employee & Employer contributions <input type="checkbox"/> |
| 3. Retrenchment <input type="checkbox"/> | 4. Death <input type="checkbox"/> 5. Mutual separation <input type="checkbox"/> |

NB: Indicate by ticking the appropriate option on resignation or dismissal on how you prefer your benefits to be paid.

BANK DETAILS

Name of Bank (ZWG): **Branch:** **Acc Number:**.....

Name of Bank (USD): **Branch:** **Acc Number:**.....

I hereby certify that the foregoing statements are strictly true and correct and that the employee has fulfilled the eligibility conditions as set out in the rules of the Fund and that the employee was in active employment on the first working day of joining the Fund.

Employee Full Name: **Employee Signature:**.....

Employer Full Name: **Employer Signature:**.....

Privacy Notice

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