CHANGE OF EMPLOYER FORM

GTCO
Guaranty Trust Pension Managers
RC 681066

Agent Code: ☐☐☐ State Code: ☐☐☐

Please update us with the details of your new employer:

RSA PIN P E N ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Name: _____
Surname First Name Other Names

Previous Employer: _____

Address: _____

New Employer Name: _____

New Employer Address: _____

Current Home Address: _____

Town/State: _____ Email: _____

GSM Number: ☐☐☐☐☐☐☐☐☐☐☐ Date of Birth: ☐☐ day ☐☐ month ☐☐☐☐ year

Place of Birth: _____ Gender: Male ☐ Female ☐

Proposed Address After Retirement: _____

State of Origin: _____ L.G.A: _____

Marital Status: Single ☐ Married ☐ Others (Please specify) _____

Next of Kin: _____
Surname First Name Other Names

Relationship: _____

Residential Address: _____

Mobile: ☐☐☐☐☐☐☐☐☐☐☐ Email: _____

Signature: _____ Date: ☐☐ day ☐☐ month ☐☐☐☐ year

Data Privacy

The personal information that you provide in this form will be collected and processed in accordance with our company's privacy policy and in compliance with the Nigerian Data Protection Act (NDPA) 2023 and other applicable laws. You can access a full copy of our privacy policy on our website at https://www.gtpensionmanagers.com/our-privacy-policy/

Signature _____ Date: ☐☐ day ☐☐ month ☐☐☐☐ year

Official Use Only

Relationship Officer _____ Head, Operations _____

For further enquiries visit our website www.gtpensionmanagers.com. Note that completed form may be scanned and sent to enquiries@gtpensionmanagers.com