As a participant in the Ohio Alternative Retirement Plan (ARP) at The University of Akron, you are entitled to change your ARP vendor once per calendar month. Your vendor change will be effective on the first day of the following pay period. **Please return the completed form to:**

Benefits Administration  
Akron, OH 44325-0602  
Phone: 330-972-7090  
Fax: 330-972-2336

______________________________  ____________________________
Employee Name (Print)          Employee ID Number

Effective____________________, I elect to change my ARP vendor from ________________________________ (current provider) to ________________________________. (new provider - check below)

Select only one of the following ARP vendors. You **MUST** contact your chosen vendor to establish your account.

- [ ] Equitable Life Assurance Company  
- [ ] Lincoln National Life  
- [ ] Nationwide Life Insurance Company  
- [ ] TIAA-CREF  
- [ ] VALIC  
- [ ] Voya Financial Partners, Inc.

______________________________  ____________________________
Employee Certification          Date

This agreement shall remain in full force and effect while I am continuously employed and eligible for the Ohio Alternative Retirement Plan. Only one vendor change may be made at the beginning of any calendar month.

______________________________  ____________________________
Employee Signature              Date

______________________________  ____________________________
Email Address                   Phone Number

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