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  
Email: benefits@uakron.edu

_________________________________________  ________________________________
Employee Name (Print)  Employee ID Number

Effective ____________, I elect to change my ARP vendor from ____________________________
(new provider - check below)  

to ____________________________.

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

☐ AIG Retirement Services  
☐ AXA Equitable  
☐ Lincoln National Life  
☐ TIAA-CREF  
☐ Voya Financial

______________________________  ________________________________
Employee Signature  Date

______________________________  ________________________________
Email Address  Phone Number