



## Contribution Change Form

### 1. Employee details

Full Name: \_\_\_\_\_  
Employee Payroll No: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
SSRSS Member No: \_\_\_\_\_ KiwiSaver Member No: \_\_\_\_\_

### 2. SSRSS - Change regular savings contributions

I want to change my total employee contribution rate to: %\* of my gross base salary.

*\*The minimum contribution rate by payroll deduction is 1.5% of gross base salary. There is no maximum.*

**Note:** if you **also contribute to KiwiSaver** from pay and the KiwiSaver compulsory employer contribution rate to which you are currently entitled is higher (as a salary percentage) than your current before tax SSRSS employer contribution rate then:

- you will become a **non-contributory and unsubsidised** member of your SSRSS scheme (though you may choose to make ongoing voluntary contributions), and
- you will begin receiving **KiwiSaver compulsory employer contributions** instead of SSRSS employer contributions.

This will likely be the case (with the rate chosen above then treated as your chosen voluntary contribution rate) if for example you contribute to KiwiSaver from pay and your chosen SSRSS regular contribution rate is less than 3%.

### 3. KiwiSaver Employer Contributions and SSRSS Voluntary Contributions *(if you wish to choose this option, tick the first box and then either the second or the third box below)*

- ◆ I am making employee contributions to a KiwiSaver scheme and want to start receiving the KiwiSaver compulsory employer contribution instead of the SSRSS matching employer contribution, if eligible
- ◆ I want to suspend my contributions to SSRSS, or
- ◆ I want to make voluntary contributions to SSRSS at a rate of: \_\_\_\_\_ %

### 4. Employee signature

Please sign and send to your payroll office, including if you are employed at a Kindergarten.

Or, if you are employed at a State or State-integrated school please sign and send your form to:

Education Payroll Limited  
Ministry of Education  
PO Box 3049  
Wellington 6140

Employee signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Payroll Use Only

Pay Run/Period Number	_____	Date	_____
Actioned/Input by signature	_____	Date	_____
Verified/Checked by signature	_____	Date	_____