

Date: (dd/mm/yyyy)

EXIT FORM (complete digitally)

Participants code (mandatory)

Personal information

Name
First names
Address
Telephone

Gender Male Female

Date of birth (dd/mm/yyyy)

ID number

E-mail

Civil Status Single Married Partner with cohabitation agreement

(The cohabitation agreement is only valid with the partner pension article included)

Date of marriage/cohabitation: (dd/mm/yyyy)

(mandatory)

Salary- and employers information

Employer

Exit reason Resign Disability Retirement Decease

Date of exit (dd/mm/yyyy)

In case of retirement

Do you receive SVB pension? Yes No

Pay slip by Email Post office

Monthly salary (on 01-01) (fulltime salary)

Parttime percentage %

Bank name

Bank account number

Swift code Bank

Signature participant

Signature HR and Company stamp

