



**MEDICAL RESIDENT / POST DOCTORAL FELLOW RETIREMENT PLAN
RETIREMENT PLAN COMPANY ALLOCATION INSTRUCTIONS**

NAME: _____ EMPLOYEE ID NUMBER: _____
CAMPUS/DEPT: _____ DATE OF HIRE: _____
DEPT. PHONE #: _____ MAILSTOP: _____ CHANGE EFF DATE: _____

Under the Nevada System of Higher Education (NSHE) Medical Resident, Post Doctoral Retirement Plan, you may allocate your retirement contributions to any of the companies listed below. You may choose up to three options. **Contributions to any company chosen must be at least 25% of the total amount, and when combined with all other companies must equal 100%.** Percentages must be whole numbers, not fractions. If you are a new employee, you must make an allocation decision at the time of hire. **If you do not make an allocation decision, your contributions will be placed into an age appropriate AIG Retirement Account by default.** If you are a current employee, you may change your allocation percentages among companies, and add or delete companies as often as you wish simply by completing this form and the appropriate enrollment application (if joining a new company). **For new and existing employees, if you do not complete an enrollment form for the company you've chosen, you will be defaulted to an age appropriate fund with your chosen company.** Changes are effective on the first day of the month immediately following receipt of your request.

MY ALLOCATION DECISION/S ARE:

TIAA-CREF
_____ % of total

AIG
_____ % of total

FIDELITY
_____ % of total

I AM:

- _____ **MAKING AN INITIAL ALLOCATION** (an application for each company selected is attached)
- _____ **ADDING ONE OR MORE COMPANIES** (an application for each new company selected is attached)
- _____ **CHANGING THE PERCENTAGES ALLOCATED AMONG MY EXISTING COMPANIES**

Once you have made your company allocations, you can choose from a variety of funds within each company. These fund choices can be established and changed at any time and in any manner each company permits. To execute changes in allocation among funds within a company, or transfer existing accumulations of contributions among companies, you must directly contact the appropriate company representative. This document only establishes or changes the percentage of future monthly retirement contributions allocated among the three companies

CERTIFICATION:

I certify that I have received information about all three companies. I further certify that NSHE has made no representation as to appropriateness of any allocation; the allocation decision above was solely my own.

Business Center North Personnel Services
Mailstop 240
70 Artemesia Way
Reno, NV 89557-0240
Fax: 775-784-1496

Signature

Date