



As a participant in the Ohio Alternative Retirement Plan (ARP) at Ohio University you are entitled to change your ARP Vendor.

Employee Name: \_\_\_\_\_ Ohio EE #: \_\_\_\_\_

Effective: \_\_\_\_\_, I elect to change my ARP vendor to:  
(date)

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

- |  |                                    |
|--|------------------------------------|
| <input type="checkbox"/> AXA Equitable | <input type="checkbox"/> TIAA-CREF |
| <input type="checkbox"/> AIG/ VALIC    | <input type="checkbox"/> VOYA      |
- 

**Employee Certification**

This agreement shall remain in full force and effect while I am continuously employed\* and eligible for the Ohio Alternative Retirement Plan, or until a new vendor change form is submitted.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_ OHIO Email: \_\_\_\_\_

\* Continuously employed means that not more than one year intervenes between each period of employment by an Ohio public institution of higher education in a position for which Alternative Retirement programs are available.

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**Office of Human Resources Certification**

I certify that this agreement complies with the Alternative Retirement Plan Guidelines

Human Resources Signature: \_\_\_\_\_ Date: \_\_\_\_\_

RETURN TO:

Mail: Human Resources- Benefits	Email: <a href="mailto:benefits@ohio.edu">benefits@ohio.edu</a>	Fax: (740) 593-0669
Grosvenor West 103		
1 Ohio University Athens,	<a href="#">Secure upload site</a>	
OH 45701-2979		

If you have any questions, please contact Human Resources at (740) 593-1636 or [planadministrator@ohio.edu](mailto:planadministrator@ohio.edu)