

**ROGER WILLIAMS UNIVERSITY – ADJUNCT FACULTY
SALARY REDUCTION AGREEMENT and VENDOR SELECTION FORM**

This is a: New Agreement Change of Agreement Effective Payroll Date*: _____ / _____ / _____

**Requested transaction(s) will be processed as soon as administratively possible upon receipt of this form.*

Employee Name: _____ Last four digits of SSN#: _____

NEW ELECTION

I elect to participate in the Roger Williams University Retirement Plan. I authorize the University/School of Law to withhold the amount elected below in accordance with the following election. This election shall remain in effect until modified or revoked. I understand that the investment of my deduction will be deposited by the retirement investment company in accordance with the investment enrollment forms that I have completed.

CONTRIBUTION: (You may remit your contribution to either retirement investment company)

I elect to contribute \$ _____ of my base salary per pay period and to remit this amount to **TIAA**; **OR**

I elect to contribute \$ _____ my base salary per pay period and to remit this amount to **Corebridge**.

CHANGE OR STOP CONTRIBUTION(S):

I elect to change my contribution to \$ _____ of my base salary per pay period.

I elect to stop my contribution.

This election shall remain in effect until modified or revoked.

CHANGE INVESTMENT COMPANY: (Transfers are subject to the provisions, restrictions and applicable fees of each VENDOR.)

I elect to change remittance of future contributions **from** TIAA **to** Corebridge **OR** Corebridge **to** TIAA

This election shall remain in effect until modified or revoked.

THIS AGREEMENT shall supersede any prior Salary Reduction Agreement and Vendor Selection Form to the extent that it contradicts and/or changes such Agreement and Form. The Agreement shall be legally binding and irrevocable as to each of the parties hereto while employment continues; provided, however, that either party may terminate this Agreement as of the end of any month, so that it will not apply to salary subsequently paid, by giving at least thirty days written notice of the termination. The Employee agrees that the total contributions on his/her behalf do not exceed the applicable limitations of Sections 403(b), 402(g), 415 or other applicable sections of the Internal Revenue Code of 1986 as amended, and/or that the University/School of Law has no obligation or liability to calculate or verify such limitations. The Employee further agrees that the University/School of Law shall have no liability whatsoever for any loss suffered by the Employee with regard to his/her selection of a retirement invested insurance company contract or associated contract or investments. The Employee understands that the University/School of Law does not recommend to the Employee that he/she participate or not participate in the Roger Williams University Retirement Plan and the University/School of Law do not warrant any particular tax consequences to the Employee as a result of such participation.

Employee Signature: _____

Date of Agreement: _____ / _____ / _____

HUMAN RESOURCES USE ONLY BELOW THIS LINE

Contribution Eligibility Date: _____ / _____ / _____

Requested Transaction processed effective Payroll Date: _____ / _____ / _____

Date Last Revised: 10/2022