

## Application for continued insurance in the Pension Fund

(Pursuant to Art. 18 of the Pension Fund Regulations)

I hereby wish to apply for continued insurance in accordance with Art. 47a of the Federal Act on Occupational Retirement, Survivors' and Disability Pension Plans (BVG). My employment was terminated by my employer after I reached the age of 55.

### 1. Personal details

Last name/First name	
Street and house no.	
Postal code/Town or city	
Date of birth	
PID no.	
Personal phone number	
Personal email address	

### 2. Continued insurance

Date of termination of employment	
My earnings capacity as a percentage is currently (0%–100%)	%
Desired pensionable salary for the accumulation of a retirement provision (No minimum amount: CHF 0 possible; maximum: last pensionable salary)	CHF
Desired pensionable salary to cover the risks of death and disability (min. pensionable salary for a retirement provision, min. CHF 15,120; maximum: last pensionable salary) <small>The insured salary is decisive for benefits; details on MyPension/insurance certificate may differ (Disability pension 70% of the insured salary. Disabled person's child's pension 15%, spouse's pension 66%, orphan's pension 20% of disability pension)</small>	CHF

Once your application has been accepted, you will receive a payment slip. Contributions are paid monthly by bank transfer (standing order).

### 3. Signature

I confirm that I am not currently signed up with any other pension fund. If I join a new pension fund in the future, this must be reported to the Pension Fund of Credit Suisse Group (Switzerland) immediately.

Place, date

Signature of the insured

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Please send the signed form to the Pension Fund of Credit Suisse Group (Switzerland), JPKS no later than one month after the termination of your employment. Email: Pension.Fund@mypension.ch