

Bryant University
(Service Employees)
Tax Deferred Annuity Plan Enrollment Form and Salary Reduction
Agreement

By This Agreement, made between _____ and Bryant University, the parties hereto agree that effective with respect to amounts paid on or after the first day of _____, 2____ (which date is subsequent to the execution of this Agreement), the employee's basic salary will be reduced by the amounts indicated below:

VOLUNTARY SALARY REDUCTION SHALL BE:

		Include Overtime Earnings (Initial)
SRA (Group) Supplemental Retirement Annuity	_____ % of salary	_____
Fidelity Investments Voluntary Contributions	_____ % of salary	_____
TIAA-CREF Voluntary Regular Retirement Annuity (Existing contracts only)	_____ % of salary	_____

WAIVE PARTICIPATION

It is understood that the amount defined above will be paid as premiums to the employee's accounts under the Institution's Tax Deferred Annuity Plan(s).

In keeping with Section 404 of the Employee Retirement and Income Security Act (ERISA), as amended, various investment options have been made available to you. Since you, and not the University and/or the Plan's fiduciaries, are solely responsible for the investment direction of your Plan account(s), Bryant University recommends that you act prudently, and carefully evaluate options before selecting investment vehicles or transferring funds from one investment to another. It is Bryant University's philosophy to promote security during your retirement years, and investment in other than fixed instruments is subject to market conditions and does not guarantee return of principal.

I understand the above, and will not hold Bryant University responsible for my selection of investment vehicles or performance of such vehicles.

This 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 earned, by giving at least thirty (30) days written notice of the date of termination.

Signed this _____ day of _____, 2____, _____
(Employee Signature)

BY: _____ for Bryant University
 Catherine Currie, Associate Director, Human Resources