Request to Waive Amortization for 2022

Please submit a completed form to the Benefits Office by Friday, November 19, 2021 if you are making a request to waive amortization for 2022.

(Print clearly) Employee Name:	Dartmouth ID:
Preferred Contact Email Address:	
Preferred Phone:	
Please describe below why you do not wish to amortiz	e your benefits for 2022.
Employee Signature:	
Deadline to return form is Friday, No	vember 19, 2021
Return this form to Human Resources – Benefits Office 1. Hand-deliver (Check office hours) or US I Human Resources – Benefits Office	
7 Lebanon Street, Suite 203 Hanover, NH 03755-2112	
2. Hinman Mail: HB 60423. Fax the Benefits Office: 603-646-11084. Email the Benefits Office: Human.Resour	ces.Benefits@Dartmouth.edu
For questions, please contact the Benefits Office at 60.	3-646-3588.
For Benefits Office Use Only: Approved or Denied: Benefits Representative to Review: HRMS Flag:	