

Employee Benefits Enrollment Update

Employee Information

Full Name

Employee ID

Department

Email Address

Benefit Selection

Medical Plan

☐

Plan A

☐

Plan B

☐

Waive

Dental Plan

☐

Plan A

☐

Plan B

☐

Waive

Vision Plan

☐

Plan A

☐

Plan B

☐

Waive

Dependents Information

List Dependents (Name, Relationship, DOB)

Other Updates

Additional Comments or Changes