



Please type or print the information in BLOCK LETTERS when filling in this form. The page must be dated and hand-signed.

SIGNATURE SPECIMEN OF CHILD AGED 16 YEARS OR OLDER

(for a child's benefit that is paid directly into the child's bank account)

Section 1:

Retiree or beneficiary information

Unique Identification number (UID) (required)

Pension number (optional)

R/ Retirement number (optional)

Last name/surname

First name

Middle name

Section 2:

Child information

Unique Identification number (UID) (required)

Date of birth (DD/MM/YYYY)

Last name/surname

First name

Middle name

Number and street of the mailing address

City

State or province

ZIP or postal code

Country

+ Country code Area code Phone number

Email

Section 3:

Acknowledgement and signature specimen

I HEREBY ACKNOWLEDGE AND CONFIRM THAT:

- I am providing my signature specimen for the process of registering it with UNJSPF.
- I have read the [instructions form PENS.S/3 \(04.2025\)](#).
- I have enclosed a copy of a valid Government-issued photo ID showing my full name, date of birth and scripted signature.

Signature (please sign within the lines of the box)

Date (DD/MM/YYYY)

Section 3:

Signature authentication

I, THE UNDERSIGNED, CERTIFY THAT THE PERSON IDENTIFIED IN SECTION 1 ABOVE SIGNED THIS FORM IN MY PRESENCE.

Printed full name of the United Nations official OR government official OR notary public

Email

Official title and licence OR index number

Signature

Date (DD/MM/YYYY)

Affix official stamp/seal of office here