**INTERNATIONAL LABOUR OFFICE AND INTERNATIONAL TELECOMMUNICATION UNION**

**STAFF HEALTH INSURANCE FUND**

NAME : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personal N° :\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRIVATE ADDRESS** :

|  |
| --- |
|  |
|  |
|  |
| Tel. |
| E-mail: |

**BANK ADDRESS** :

|  |  |  |
| --- | --- | --- |
| ***Name of Bank :*** |  | |
| ***Address :*** |  | |
| ***Account n° / IBAN :*** |  | |
| ***BIC / SWIFT*** |  | ***ABA / Routing N°***  ***or Sort Code*** |
| ***Currency of the account:*** |  | |

*Date: Signature:*

NB: The bank account changement form only concerns the retirees, it’s not applicable to the active staff of ILO.