

# Fund Switching Form



FM-AZTK-IL-030

## Policy and Participant Details.

Full Name of Participant:

CPR Number:  Date of birth: (DD-MMM-YY):

Telephone No.:  Mobile No.:

Policy/Contract No.:

## Fund Switching / Contribution Redirection.

Switching would be valid only on specific days during the month (valuation dates). Redirection would be valid for the future contributions upon payment. The allocations indicated below are percentages of units, which is the basis of redemption / purchasing. If there are any charges applicable, the same shall be deducted from the Participant Investment Account.  
Request to switch the value of units credited to the strategy(ies)/fund(s) and to redirect future contribution(s).

Name of Strategy / Fund	Existing Allocation	Proposed Allocation
Allianz RCM Islamic Global Equity Opportunities Fund		
Allianz RCM Islamic Global Equity Opportunities Fund		
BNP Paribas Islamic Fund		
DWS Asia Pacific Equity Fund		N/A
DWS Noor China Equity Fund		N/A
DWS Noor Global Equity Select Fund		N/A
DWS Noor Japan Equity Fund		N/A
DWS Noor Precious Metals Securities Fund		
TOTAL	100%	100%

## Signature :

Please sign over printed name.

Participant:  Date Signed:

Takaful Consultant:  Date Signed: