

Welcome to Workday Self Service. Within Workday, you can manage your beneficiaries by adding, editing, and changing beneficiary allocation and information. This guide covers general information on how to add beneficiary information. If you have any questions please contact your Benefits Team.



**Note:** You will need social security numbers, date of birth, and addresses to make add or make modifications to your beneficiaries.


## MANAGE BENEFICIARIES

A beneficiary is a designated individual who would receive your Life Insurance Benefit. You can change, edit, and add beneficiaries from the Benefits application.



**Note:** If you are your assigning existing dependents or emergency contacts as beneficiaries, please go to Assigning Beneficiaries section on page 3

From the From your Home page:

1. Click the **Inbox**  icon.
2. Click the **Open Enrollment Change** task.
3. Click **Let's Get Started**.
4. All Life Insurance Plans that you are enrolled in/can enroll in will appear. Click **Manage** to add beneficiary.

Insurance

**Basic Life and AD&D**  
Sun Life Financial (Employee)  
REVIEWED

Coverage \$70,000

Manage

5. Review the plan information. Click **Confirm and Continue**

**Basic Life and AD&D**

Projected Total Cost Per Paycheck \$0.00      Projected Total Credits \$0.00

**Plans Available**

1 item

Benefit Plan	*Selection	Company Contribution (Semi-monthly)
Sun Life Financial (Employee)	<input checked="" type="radio"/> Select <input type="radio"/> Waive	\$3.33

Confirm and Continue      Cancel

6. Click **Add Icon** In Beneficiary column to add beneficiary.
7. Click **Add Icon** In Beneficiary column to add beneficiary.
8. Click the **Prompt Icon** and select **Add New Beneficiary or Trust**
9. In the pop up window select if you are adding a **New Beneficiary** or **New Trust**.
10. Enter **all** required information, denoted by an asterisk.

**Add New Beneficiary or Trust** Bucky Bronco

Relationship \*

Use as Beneficiary

Date of Birth

Age 66 years, 7 months, 15 days

Legal Sex

Allow Duplicate Name

**Legal Name** Contact Information National IDs Additional Government IDs

Country \*

Prefix

First Name \*

Middle Name

Last Name \*

Suffix

Legal Name **Contact Information** National IDs Additional Government IDs

**Phone**

**Address**

Use Existing Address

Country \*

Address Line 1 \*

Address Line 2

City \*

State \*

Postal Code \*

County

**Usage**

Type \*

Legal Name    Contact Information    **National IDs**    Additional Government IDs

National IDs 1 item

	*Country	*National ID Type	Current ID	Add/Edit ID	Issued Date	Expiration Date	Issued By
	United States of America	Social Security Number (SSN)		000-00-0000	MM/DD/YYYY	MM/DD/YYYY	

OK    Cancel

11. Click **OK** when done.
12. Make sure to add percentage that you are designating for this beneficiary/trust.
13. If adding more than one beneficiary to a plan, click the **Add Icon** to repeat the process. If you are adding more than one beneficiary, the total percentage must equal 100%.
14. Click **Save** when done.
15. When all changes complete you will be brought to the main page with a confirmation message about actions taken. Either update other plans or if done click **Review and Submit**.

### Beneficiary Change

Projected Total Cost Per Paycheck \$0.00    Projected Total Credits \$0.00

Insurance

**Basic Life and AD&D**  
Sun Life Financial (Employee)  
REVIEWED

Coverage \$70,000

[Manage](#)

**Voluntary Life Employee**  
Waived

[Enroll](#)

**Review and Sign**    Save for Later

**16. Review your benefit elections and beneficiaries. Check off the I Agree box to provide an electronic signature confirming your changes.**

**Electronic Signature**

LEGAL NOTICE: Please Read

Your Name and Password are considered your "Electronic Signature" and will serve as your confirmation of the accuracy of the information being submitted. When you check the "I AGREE" checkbox, you are certifying that:

1. You understand that your benefit elections are legal and binding transactions.
2. You understand that all benefits are contingent upon your enrollment and acceptance by your HR representative and by your insurance carriers or benefit providers.

Kaiser Enrolled Employees

If you enrolled into SCU's Kaiser plan, this electronic signature acknowledges that you accept the rules and regulations of Kaiser California.

I Agree

Submit    Save for Later    Go Back    Cancel

17. Click **Submit**. This will finalize your Open Enrollment Benefits. You will have the opportunity to go back and edit through November 22, 2024.