

Date of receipt:

Opting in: Election to join the Teachers' Pension Scheme

Please complete this form using black ink and BLOCK CAPITALS

Part A: To be completed by the applicant in all cases.

Notes: Since 1 January 2007, members who commence part-time employment or a new part-time contract are automatically members of the Teachers' Pension Scheme (TPS). Existing members who worked part-time before 1 January 2007 (and are continuing to do so) may elect to join the scheme. Any members who've previously opted out of the Teachers' Pension Scheme and wish to rejoin it, outside of an auto or contractual enrolment period, must make a formal application.

• **Please do not complete an election each time you start a new contract of employment. Your employer will automatically enroll you into the TPS.**

- **Please do not complete this election if you are currently receiving retirement benefits from the TPS and taking up a new appointment. Your service will automatically become pensionable in the TPS when you take up the appointment.**
- **Please do not complete this election if you are opting in due to Auto Enrolment - your Employer will do this on your behalf.**

Once your election has been processed and accepted, a confirmation letter will be issued.

If your election doesn't meet the requirements of the Teachers' Pensions Regulations, TP can override the employer's decision.

Section 1: Personal details

1. **Teacher's reference number** (example 99/99999)

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2. **Surname** (one character per box)

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3. **Former surname** (if any)

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4. **First name**

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5. **Title** (please tick, or state if other)

Mr Mrs Miss Ms Other

6. **Date of birth**

D	D	M	M	Y	Y	Y	Y
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7. **National Insurance number**

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8. **Contact address**

Postcode

9. **Home telephone number** (inc. STD code)

10. **Mobile telephone number**

11. **Personal email address**

12. **Please enter the name of the Employer for the contract to which this opt in relates** (If your Employer is a Local Authority, then please enter the LA name. Otherwise, please provide the full name of the school / establishment)

(continued overleaf)

Part A: To be completed by the member in all cases. (continued)

Section 2: Election confirmation. Must be signed and dated by the applicant.

I elect for the contract of employment in the establishment named in question 12 above to be treated as pensionable.
I understand that contributions will be paid from my salary in respect of service at that establishment.

Signature

Date

D	D	M	M	Y	Y	Y	Y
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General Data Protection Regulation (GDPR). The Department for Education (DfE) will use any information you provide in connection with the Teachers' Pension Scheme to administer and operate the scheme and pay benefits under it. This may include passing details to third parties that are involved in the administration and operation of the scheme. The DfE may also use your data for administrative purposes in line with its data protection notification. In order to fulfil its duty to protect public money, the DfE may use information it holds to prevent and detect fraud. It may also share information with other organisations that handle public funds. If there is any difference between the legislation governing the Teachers' Pension Scheme and the information in this application form, the legislation will apply. For more information on how we will use your data, go to www.teacherspensions.co.uk/public/privacy

Please return to us at:

Teachers' Pensions,
11b Lingfield Point,
Darlington, DL1 1AX

www.teacherspensions.co.uk

Please complete this form using black ink and in BLOCK CAPITALS.

Part B: To be completed by a recognised employer. (e.g. Independent Schools, Universities, FE Colleges, Academies and Local Authorities)

Notes: Effective dates of elections

Part-time elections:

- The effective date will be the first day of the month following the month in which the application was received by Teachers' Pensions.

Opting-in elections:

- The effective date will be the first day of the month following that month in which the application was received by Teachers' Pensions.
- An election takes effect from the first day of the month after the election was received by Teachers' Pensions or, if it was received within 3 months of the start of any period of employment that would otherwise be pensionable, from the first day of the employment.

- If you want the election to be accepted from an earlier date than the current date – and contributions have been deducted from the employee's salary – please provide copies of payslips to support the application.
- This form should not be used for Auto Enrolment of employees into the Teachers' Pension Scheme (TPS). Employers should instead complete the 'Auto Enrolment' template which is available via Employer Portal (formally known as STU) download facility.

Section 2: Effective date of election

Employers must commence deductions of contributions immediately from the effective date. The effective date of the election will normally be the first day of the month following the month in which the application was received by Teachers' Pensions. If a retrospective election is required the employer must confirm the date from which contributions were deducted and submitted to the Teacher's Pension Scheme. Evidence may be required.

1. Is teacher full or part time at point of opt in?

FT PT

2. Full time equivalent annual salary at point of opt in

per annum

3. Actual annual salary at point of opt in

per annum

4. If retrospection is required, have contributions been deducted and remitted to the Teacher's Pension Scheme each month? (If yes, please provide copies of documentary evidence, i.e. copy of payslips or payroll extract)

Yes No

Please enter effective date of election

Part B: To be completed by a recognised employer. (continued)

Section 2: Employer's declaration. To be completed in all cases

I confirm that this post satisfies the provisions of the Teachers' Pensions Regulations. Notification of the appointment has been submitted to the Teacher's Pension Scheme separately via Monthly Data Collection . All contributions required under these regulations will be collected and paid to Teachers' Pensions.

1. Signature of authorised officer

2. Name of authorised officer

3. Date

D	D	M	M	Y	Y	Y	Y
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4. Telephone number (inc. STD code and extn.)

5. Email address (we will use this email address to confirm details of the opt in)

6. Establishment/Employer number to which this teacher is opting in

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7. Full address

Postcode

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