

Date of receipt:

Joiner Questionnaire

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

The purpose of this form is to ensure that you are afforded the service and eligibility protections brought about by the Public Service Pensions Act 2013. Under certain conditions the act allows for a new member of a public sector pension scheme, who has previous membership in other public service pension schemes, to retain any protection they held in their previous scheme(s).

There are two possible elements of protection each with their own eligibility criteria:

1. Salary Link protection (only enabled where previous public service benefits are transferred to the Teachers' Pension Scheme), and protection in the final salary arrangement is retained from your previous public service pension scheme then this may be carried over to the Teachers' Pension Scheme.
2. Protection eligibility in order to determine in which arrangement of the Teachers' Pension Scheme you will build up your benefits. If full protection or tapered For either protection to be enabled, this must be certified by your previous public service pension administrator.

Section 1: Your public service pension history

To help us understand your previous pension service history please complete the following:

1. **Have you had pensionable service in any another Public Service Pension Scheme, prior to joining the Teachers' Pension Scheme?** For example were you a civil servant, local government worker, in the NHS, fire and rescue worker, in the judiciary, or a member of the police or armed forces in the UK?
Yes No
2. **Do you have a previous public sector employment which was, or is now, part of a TUPE transfer arrangement?**
Yes No

If you have answered 'No' to all of the above questions, you do not need to take any further action with this form.

If you have answered 'Yes' to one of the questions please continue.

In order for Teachers' Pensions to accurately apply any public service protections to which you may be entitled, we have provided the enclosed form for completion by yourself and your previous public service pension scheme administrator. If you have more than one previous public service scheme this information must be certified by each of your previous public service pension providers.

Please complete 'Parts A & B' and then pass the form to your previous public service pension administrator(s), who should then complete 'Part C' and return the form directly to:

Teachers' Pensions
11b Lingfield Point
Darlington
DL1 1AX

(continued overleaf)

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.

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Darlington, DL1 1AX

www.teacherspensions.co.uk

Part A: About you and your new Teachers' Pension Scheme employment

Section 2: Personal details

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

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

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

4. **First name**

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

Mr Mrs Miss Ms Other

6. **National Insurance number**

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7. **Name and address of new employer**

Postcode

8. **Start date of new role**

D	D	M	M	Y	Y	Y	Y
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Part B: About your previous public service pension scheme membership

Please provide us with the details of the Public Service Pension Scheme to which you have previously been a member? If you had more than one employer while a member of that Scheme, please give details of the last relevant employer.

Section 3: Your previous Public Service Pension Scheme

1. **Name of public service pension scheme**

2. **Last employer while a member of this scheme**

3. **Start date of scheme membership**

D	D	M	M	Y	Y	Y	Y
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4. **End date of scheme membership**

D	D	M	M	Y	Y	Y	Y
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5. **Pension Scheme Membership number (if known)**

6. **Have you received a refund for this period of service?** Yes

No

7. **Do you hold a deferred benefit for this period of service? (i.e. pension benefits that have not yet been taken)**

Yes No

8. **Are you in receipt of a pension for this period of membership?**

Yes No

9. **Have you transferred these benefits to another pension provider?**

Yes No

a) **If 'yes' please provide name of pension scheme and provider to which the benefits have been transferred.**

b) **Was this transfer part of a 'TUPE' transfer?**

Yes No

Section 1: Certification

1. Name of public service pension scheme

2. Name of Administrator / Sub Scheme Administrator

3. Address of Administrator / Sub Scheme Administrator

Postcode

Section 2: Declaration

1. We confirm that the information completed in Part B is correct. Yes No

If any information provided in Part B is incorrect, please provide the correct details below:

2. Dates of pensionable service:-
 (Please provide start and end dates, with split service only where there is a gap in service of more than 5 years)

3. Type of protection (If tapered protection please provide the end date)

D	D	M	M	Y	Y	Y	Y
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4. Was Salary Link protection still in place at date of leaving scheme? Yes No

(If no protection or tapered protection had ended and member was in career average at date of leaving)

5. We confirm that on 1 April 2012, whilst a member of our public service pension scheme, the member met the protection afforded by Regulation 18 of the Public Service Pensions Act 2013.

Yes No

(continued overleaf)

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We certify that the information provided in this form is correct and may be used to determine if the member noted in Part A is eligible for any protections under the Public Service Pensions Act 2013.

Signature

Date

D	D	M	M	Y	Y	Y	Y
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1. Name of Official (in capital letters)

2. Role of Official (in capital letters)

3. Telephone number (inc. STD code and extn.)

4. Email address

5. Contact address

Postcode

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