

# Nomination for death grant

Before completing this form, please read the accompanying notes.  
Please complete this form using black ink and BLOCK CAPITALS.

## To be completed by the applicant in all cases.

### Section 1: Personal details

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

/

7. National Insurance number

2. Surname (one character per box)

8. Contact address

3. Former surname (if any)

Postcode

4. First name

9. Home telephone number (inc. STD code)

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

Mr Mrs Miss Ms Other

10. Mobile telephone number

6. Date of birth (DD/MM/YYYY)

11. Email address

### Section 2: Nomination details

I nominate the following individual to receive, in the proportion shown, the death grant which may be payable under the Teachers' Pension Scheme regulations.

**Notes:** If you wish the death grant to be divided up for two or more individuals please provide the appropriate details on a separate sheet of paper attached to this form. Ensure that the proportions you have specified add up to 100% exactly.

1. Surname (one character per box)

4. Contact address

2. First name

Postcode

5. Total of percentage

3. Date of birth (DD/MM/YYYY)

%

## To be completed by the applicant in all cases. (continued)

### Section 3: Declaration

- I confirm that any previous nominations I have made are cancelled in favour of this one.
- I understand that I can revoke or change this nomination at any time.
- I understand that if I marry, re-marry or form a civil partnership, my nomination **will not** be revoked.
- I understand that a death grant is only payable in the following circumstances: death in service; death in deferment (qualified for benefits); and death of a pensioner who has not had 5 years' receipts of their pension.

### If a nominee predeceases me, their share of the death grant should be:

Shared among the surviving nominees in the same proportion as in this nomination.

Paid to my personal representative as named on the Grant of Probate (or Confirmation if in Scotland).

Signature

Date (DD/MM/YYYY)

### Section 4: Attestation

The witness must not be related to the applicant.

- I certify that this declaration was signed on this day, in my presence, by the person who I believe to be the applicant.

Signature

Date (DD/MM/YYYY)

1. Name

3. Contact address

2. Telephone number (inc. STD code)

Postcode

**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](http://www.teacherspensions.co.uk/public/privacy).

### Please return to us at:

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

[www.teacherspensions.co.uk](http://www.teacherspensions.co.uk)

Please read these notes before completing this application.

## Notes

1. You should review your circumstances regularly and particularly following any significant change in your personal circumstances. Relevant changes may include marriage, divorce or separation. You can submit a new nomination or change an existing one through the website or by completing the Nomination for death grant form. You should ensure that Teachers' Pensions or the executors of your will (if there are any) are advised of any change in your nominee's address.
2. If you intend that only your spouse, civil partner or qualifying partner receives the grant payable there is no need to complete this form. The Scheme Regulations provide for your spouse, civil partner or qualifying partner to receive the death grant when there is no other nomination. If you are married or in a civil partnership and you separate, and you no longer wish for that person to receive your death grant, you may wish to nominate someone else to receive the death grant. This is because until you divorce or dissolve the partnership their entitlement remains, unless a nomination is in effect.
3. If you subsequently marry or enter into a civil partnership it will not have the effect of revoking this nomination. You will need to revoke this nomination if you no longer wish your nominee to receive the death grant.
4. A nomination can be revoked at any time. If you wish to revoke your nomination, please notify us in writing. If you wish to change your nomination, you should complete another Nomination for death grant form. This will revoke any previous nominations.
5. Where you make multiple nominations you must indicate the percentage of the death grant that you wish each nominee to receive. The combined nominations must total 100%.
6. Where there is no valid nomination, spouse, civil partner or qualifying partner, the death grant will be paid to your personal representative named on Grant of Probate (or Confirmation if in Scotland).
7. If your death grant nominee pre-deceases you, the designated proportion of the death grant will be paid to your spouse, civil partner, qualifying partner or, if you are single, to your estate.
8. It is your responsibility to ensure that the nominee is acquainted with the terms of the nomination.
9. You should ensure Teachers' Pensions or the executors of your will (if there are any) are advised of any change in your nominee's address.
10. If the nominee is under 18 years of age, the lump sum will be paid to their legal guardian.
11. What is a qualifying partner?  
The criteria to be considered as a qualifying partner are that for a continuous period of at least two years immediately prior to your death:
  1. You were able to marry or form a civil partnership with your partner;
  2. You and your partner were living with each other as if you were a married couple or civil partners;
  3. Neither you or your partner were living with a third person as if they were a married couple or civil partners; and
  4. You and your partner were financially interdependent or your partner was financially dependent on you.

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