

NHS Pensioner Re-employment Form

This form should be used to notify us of any new re-employment, changes to a re-employment including an employment that continued when you retired, or ceasing re-employment. It must be signed by your employer.

Part 1 – To be completed by you.

| Name: | |
|---|--|
| Date of birth: | |
| Payroll Number: | |
| SD Number: | SD / |
| Signature: | |
| Date: | |
| National Insurance Number | |
| Please indicate why you are | completing this form (tick one box only): |
| To notify us of starting a new | re-employment Go to part 1a |
| To notify us of a change to ye | our existing re-employment Go to part 1b |
| To notify us that you have ce | ased re-employment Go to part 1b |
| Part 1a – Notify us of a new | v re-employment |
| Will you be re-employed in th | ne NHS? |
| If No, please return this form | to NHS Pensions, PO Box 2268, Bolton, BL6 9JR. |
| If Yes, please ask your emplo | oyer to complete parts 2 and 3 and return the form to us. |
| Important: If you retired bec to work after ill health retirem | ause of ill health please also read the factsheet "NHS Pensions - returning ent" on our website. |

Part 1b - Notify us of a change to your re-employment or you have ceased re-employment

Please ask your employer to complete parts 2 and 3 and return the form to us.

Part 2 – To be completed by your employer.

Please answer all relevant questions below. Incomplete forms will be returned and could result in a delay in paying pension or cause an overpayment, which the employee will have to re-pay.

- To notify us of a new re-employment please complete sections 2a, 2b and 3.
- To notify us of a change of an existing re-employment please complete sections 2a and 3.
- To notify us of a re-employment ceasing please complete sections 2c and 3.

Note: Where we ask for pay we require the "pensionable pay" that contributions are normally paid on. For more details see the "Employers quick start guide to the NHS Pension Scheme" on our website.

| Part 2a - New/changed re-em | ployment Details | | | | | | | |
|--|-------------------------|--|---|---|--|---|--|--|
| Re-employment start/change date: | | | | | | | | |
| Grade / Role / Job Title: | | | | | | | | |
| Employee reference: | | | | | | | | |
| Contracted hours per week: | | | | | | | | |
| Gross NHS annual pay / salary: | | | £ | | | | | |
| Part 2b - New re-employment | details | | | | | | | |
| Working hours per week (first month following retirement): | | | | | | | | |
| Gross NHS pay / salary (first month following retirement): | | | £ | | | | | |
| Part 2c - Re-employment end | details | | | | | | | |
| Re-employment end date: | | | | | | | | |
| NHS earnings from 1 April to the re-employment end date: | | | | | | | | |
| Part 3 – Declaration | | | | | | | | |
| I certify the above is correct | Signature: | | | | | | | |
| | Print Name: | | | | | | | |
| | Employing Authority: | | | | | | | |
| | Date | | - | 1 | | 1 | | |

How we use your information

The NHS Business Services Authority – NHS Pensions will use the information provided for administering your NHS Pension Scheme membership and processing payment of your NHS pension benefits. We may share your information to administer and pay your NHS pension, enable us to prevent and detect fraud and mistakes, for debt collection purposes, or as required by law. For more information about who we share your information with and how long we keep your personal data and your rights, please visit our website at www.nhsbsa.nhs.uk/yourinformation