*1 2*

**Practice Name/ Practice Code:**

**Address Stamp:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DETAILS OF ASSISTANT/RETAINEE PRACTITIONER** | | | | | | | | |
| *3* Name of Practitioner *(in full)* : | | |  | | | | | |
| *4* National Insurance Number: | | |
| *5* Cypher Number: | | |  | | | | | |
| *6* Start Date: | | |  | | | | | |
| *7* Termination Date: | | |  | | | | | |
| *8* Salaried/Retainee *(please specify)* : | | |  | | | | | |
| 9  Estimated Superannuation Salary for Year 2020/21 **(Existing GPs)** | 10  Estimated Superannuation Salary for Year 2020/21 Pro Rata  – Annualise\*  **(GPs starting of leaving in year)** | Contributions to be Paid for Year 2020/21 | | | | | | |
| Employee | | | Employer | | Added Years | |
| *11*  £ | | *12*  % | *13*  £ | *14*  %**(22.5%)** | *15*  £ | *16*  % |
|  |  |  | |  |  |  |  |  |
| ***\*CARE 2015 membership : From 1 April 2015 the pay that is used to set the contribution tiered rate for GP (and non-GP) Providers who starts after the 1st of April or leaves before the 31st of March is annualised. For example a GP who starts at a surgery on 01/06/2020, joining the scheme for the first time and earns£70,000.00 up to 31/03/2021 will be subject to the 13.5% rate. (£70,000.00 divided by 304 days x 365 days = notional pay of £84,046.05).*** | | | | | | | | |
| **DECLARATION OF EMPLOYER** | | | | | | | | |
| *I certify that the information on this form is correct* | | | | | | | | |
| *17* Print Name: | |  | | | | | | |
| *18* Position in Practice: | |  | | | | | | |
| *19* Signature: | |  | | | | | | |