

Termination of Scheme Membership Notice (T55a)

Personal Details

1. National Insurance Number:

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2. Gender: Male Female

3. Date of Birth:

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4. Staff No.:

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5. Full name:

6. Partnership Status:

7. Home address:

Current Employment

8. Start date of current period of Pensionable Employment within Pay Office:

		/			/				
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9. Last deemed day of Pensionable Service:

		/			/				
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10. Rate of employee contribution:

 %

11. What category is the member currently serving in?

Special Class/MHO Other

12. Please tick type of employment:

Full-Time Part-time Sessional Term-time Bank work

13. If the member is not **Full-time** please complete both tables below:

(i)

Contracted hours	Standard hours	Start Date

(ii)

Year ending	Total Hrs worked
31/3 -	
31/3 -	
<i>Insert final part year in box below</i>	

Contributions

	Amount of employee's pensionable contributions paid in the period		Additional conts. IRO added years or unreduced lump sum		Employee's pensionable earnings		Employee's National Insurance earnings between the upper and lower earnings limit	
	£	p	£	p	£	p	£	p
31/03 -								
31/03 -								
31/03 -								
<i>Insert final part year in box below</i>								

14. Arrears of contributions remaining unpaid on leaving service:

£

15. Pensionable earnings in best of last 3 years for benefit purposes (only if pensionable employment has ceased – 1995 scheme only)

£

Comments

16. Comments – (to include information on any periods of no pay/half-pay/career breaks etc.)

Certification

I hereby certify that the particulars given in this record sheet are to the best of my knowledge and belief, correct and in accordance with the records of this Employing Authority.

Signature:

Position:

Date:

/ /

Employing Authority or GP Practice stamp

Trust identifier