HSC Business Services Organisation

GP Practice, Direction Employers & Out of Hours Staff (J2)

Notification of Start of Pensionable Employment

INVESTORS IN PEOPLE

This form must be completed and sent to HSC Pension Service immediately a person starts pensionable employment

To be completed by an authorised officer of the employer – not the member.

1. National Insurance Number

2. Date of Birth ____/____/_____

3. Has date of birth been verified from birth certificate Yes ◉ No ○

4. Title

5. Sex

6. Surname

7. Initials

8. Forename

9. Address

10. Postcode

11. Telephone

12. Email

13. Date Started Current Pensionable Employment

14. Date Member Joined Employment

15. Reason (if any) member was not pensionable from first date of employment (opted out, not eligible for Auto enrolment, postponed etc)

16. Capacity in which employed? (Job Role)

17. Whole-time or part-time? (FT/PT/bank/adhoc)

18. Is this the joiner's only pensionable employment? Y/N If N, please give details of other employments. (e.g. Practice No, HSCT, Staff No)

19. If part-time, proportion of whole-time as a fraction. To represent contract hours and FT hours (25.5/37.5 etc)

20. Annual Whole Time Equivalent (WTE) Salary on date for Q 13.

21. Employer Declaration

I declare that I have issued the member with a copy of the 2015 Scheme Guide.

Sign here _____

Name _____

Official Designation _____

Date _____

Telephone Number _____

E-Mail _____

Stamp:

Practice Identifier: Z00 _____

Send to: HSC Pension Service, Orchard House, 40 Orchard House, Londonderry, BT48 6AT or email to hscpensions@hscni.net