

## CETV Pension on Divorce or Dissolution of Civil Partnership PD2

*Employer Use Only*

### Part 1 – Members Personal Details

Surname

Forename

National Insurance Number

Staff Number 1

Staff Number 2 (if applicable)

### Part 2 – Total Pensionable/Reckonable Pay/Actual Earnings

Please complete the information below and forward this form along with the PD1 to HSC Pension Service

#### 1995 Section:

(i) The Total Superannuable Remuneration (TSR) for the final 3 years:

Year 1: From  to  TSR £

Year 2: From  to  TSR £

Year 3: From  to  TSR £

Number of Part-Time hours worked from  to date of receipt of this form is

#### 2008 Section:

(ii) The Total Pensionable Pay (TPP) for best three consecutive years of the last ten years of employment:

Year 1: From  to  TSR £

Year 2: From  to  TSR £

Year 3: From  to  TSR £

Number of Part-Time hours worked from  to date of receipt of this form is

**2015 CARE Scheme:**

(iii) 2015 Scheme Actual Pensionable pay:

				<i>Employment 1</i>		<i>Employment 2</i>	
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<input type="text"/>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>
<b>Final Year</b>	-	<input type="text"/>	AE	£	<input type="text"/>	£	<input type="text"/>

Comments (to include periods of no pay/career break etc.)

**Part 3 – Certification of earnings details**

Signature:

Position:

Date:

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Employing Authority or GP Practice stamp

Trust identifier