

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:

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Payroll Number:

SD Number:

SD			/						
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Signature:

Date:

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National Insurance Number

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Please indicate why you are completing this form (tick one box only):

- | | | |
|---|--------------------------|---------------|
| To notify us of starting a new re-employment | <input type="checkbox"/> | Go to part 1a |
| To notify us of a change to your existing re-employment | <input type="checkbox"/> | Go to part 1b |
| To notify us that you have ceased re-employment | <input type="checkbox"/> | Go to part 1b |

Part 1a – Notify us of a new re-employment

Will you be re-employed in the NHS? Yes No

If No, please return this form to NHS Pensions, PO Box 683, Unit 5, Newcastle Upon Tyne, NE5 9EE.

If Yes, please ask your employer to complete parts 2 and 3 and return the form to us.

Important: If you retired because of ill health please also read the factsheet “NHS Pensions - returning to work after ill health retirement” 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-employment 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	

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