

APPLICATION FOR JOB RESHAPING AND PARTIAL RETIREMENT

(This form is for use ONLY by staff not covered by HRConnect)

Before completing the application form, please note:

If you are a member of the PCSPS(NI), you should read the booklet "Partial Retirement - A guide for scheme members". If you are a member of alpha you should read Section 05B (Partial Retirement) of the alpha Scheme Guide. If you are a member of alpha and also have benefits the PCSPS(NI) you should read both the booklet and the alpha Scheme Guide.

All personal information will be held in accordance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.

Section 1: About you

Please fill in Sections 1-3 and send the form to your Line Management

Name: (BLOCK CAPITALS) Nat Ins Number:

Tel No. (for queries): Date of Birth:

Your pension scheme: (Please tick) classic classic plus premium nuvos alpha

We will email you a partial retirement illustration if you are over minimum pension age, but you don't have to take any of your pension if you do not want to.

Please state an email address to which you want us to send your quote:

Section 2: Your current job

Employer:

Your current work pattern: Full Time Part Time

Job Description/ Title:

Location:

Give details of days/hours worked

Planned end date of current job

Section 3: Your reshaped job

Employer:

Your new work pattern: Full Time Part Time

Job Description/ Title:

Location:

Give details of days/hours worked

Planned start date of reshaped job

I wish to reshape my job as detailed above. By ticking this box I declare that I have read the booklet "Partial Retirement - a guide for scheme members", and have looked at the calculator on the CSP(NI) website to see what the financial implications might be.

Section 4: Line Management approval

I confirm:

- that the details shown for the current and reshaped job are correct
- that the member's annual rate of salary and permanent pensionable earnings will reduce by at least 20% and I have provided details in Section 6 below
- that the job reshaping is intended as a permanent change

I represent:

The current employer The new employer Both current and new employers

Name: (BLOCK CAPITALS)

Role:

Date:

Tel No:

Email:

Section 5: Employer (Head of Branch) authorisation

I hereby authorise this application for the reshaped job as detailed above

I represent:

The current employer The new employer Both current and new employers

Name: (BLOCK CAPITALS)

Role:

Date:

Tel No:

Email:

Section 6: Employer confirmation of current earnings and details of reshaped job

Current Job

Total annual rate of actual pay and permanent pensionable allowances:

£

Reshaped Job

Start Date:

Salary:

(annual full-time rate)

£

Salary:

(annual part-time rate - if applicable)

£

Permanent pensionable allowances:

(annual full-time rate)

£

Permanent pensionable allowances:

(annual part-time rate - if applicable)

£

Total annual rate of actual salary and permanent pensionable allowances:

(should be at least 20% less than for current job)

£

On approval this form should be submitted BY THE EMPLOYER (Head of Branch) to:
cspensions@finance-ni.gov.uk (Please cc the applicant)

All personal information submitted to Civil Service Pensions (NI) is held in accordance with Civil Service Pensions, Department of Finance, Privacy Policy which is published on the CSP(NI) website:

www.finance-ni.gov.uk/civilservicepensions-ni