

JOINER QUESTIONNAIRE FORM

Please indicate which scheme you have joined and your date of joining or re-joining the scheme.

NHS Pensions Scheme Scotland	<input type="checkbox"/>	Police Pension Scheme Scotland	<input type="checkbox"/>
Teachers' Pension Scheme Scotland	<input type="checkbox"/>	Firefighters' Pension Scheme Scotland	<input type="checkbox"/>
Date of Joining / re-joining		<input type="text"/>	

Section 1 – Previous UK Public Sector Pension Service History

Please note if you have preserved benefits preserved in another UK Public Sector Pension scheme and have joined your current scheme within five years of leaving, you may be entitled to retain an earlier normal pension age.

Do you have previous service in another UK Public Sector Scheme ?

Yes

No

If you have answered **No** please go directly to **Section 2**.

If you have answered YES please complete the table below and provide further details in the table on Section 2.

Previous Scheme	Reference No.	Date Joined	Date Left	Country
NHS Pension Scheme				
Teachers' Pension Scheme				
Local Government Pension Scheme				
Civil Service Pension Scheme				
Police Pension Scheme				
Firefighters' Pension Scheme				
Armed Forces Pension Scheme				
Judicial Pension Scheme				

Do you wish to consider transferring these benefits to your current pension scheme ?

Yes

No

Have you taken out a contract to purchase Added Years and/or Additional Pension with your previous scheme?

Yes

No

If you have confirmed that you have previous service in another UK public sector but have elected not to transfer, it is your responsibility to provide evidence of your previous scheme membership to SPPA.

Section 2 – Transferring Other Pension Benefits Not Covered in Section 1

Please complete this section if you wish to investigate the transfer of any former pension rights. If you have more than one transfer please complete separate copies for each different pension provider or policy. In most cases you will be provided with an estimate of the potential credit the transfer value from your former pension scheme may provide in your current scheme. You can then decide if you wish to proceed with the transfer once an estimate has been provided.



If your personal details on this form differ from those held by your former pension provider they may not supply SPPA with the requested information. You should ensure your details have been updated with the previous pension provider before submitting this form to SPPA.

PLEASE GIVE DETAILS OF ALL PREVIOUS PENSIONS / EMPLOYMENT HISTORY (CONTINUE ON SEPARATE SHEET IF NECESSARY)				
Name & address of Employer	Name and address of Pension Scheme provider	Reference / Policy Number	Dates of service / Scheme membership	Were contributions refunded ?

Section 3 – Personal Details

<p>Surname</p> <input type="text"/> <p>Former surname (if applicable)</p> <input type="text"/> <p>Forenames (in full)</p> <input type="text"/> <p>Title</p> <p>Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/></p> <p>Other (specify) <input type="text"/></p> <p>Date of birth (e.g. 15/04/1943)</p> <input type="text"/> / <input type="text"/> / <input type="text"/> <p>National Insurance Number</p> <input type="text"/>	<p>Contact Address</p> <input type="text"/> <input type="text"/> <input type="text"/> <p>Post code</p> <input type="text"/> <p>Home telephone number (incl STD code)</p> <input type="text"/> <p>Mobile telephone number</p> <input type="text"/> <p>Email address</p> <input type="text"/>
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Section 4 – Declaration / 3rd Party Mandate

I confirm that all the information I have given on this form is true to the best of my knowledge.

I understand that if I have previous membership of another UK Public Sector Pension Scheme then SPPA will be unable to update my scheme membership unless verification is provided.

I authorise my former pension provider to supply SPPA with details of my previous pension rights including any transfer value and discharge forms and where necessary to validate or verify any information they may require.

Signature _____ Date _____

Please return completed form to: SPPA, 7 Tweedside Park, Tweedbank, Galashiels TD1 3TE

JOINER QUESTIONNAIRE FORM COMPLETION NOTES

SPPA administer a number of Public Service Pension Schemes in Scotland. This is a generic form used for all of these Schemes. You should tick the box of the scheme that applies to you and provide the date that you have either joined, or re-joined.

Section 1 – Previous UK Public Sector Pension Service History

This section should be completed if you have been in a Public Sector Pension Scheme in any previous employments. This will allow us to ensure that you are entered into the correct pension scheme in your current employment. You should answer yes or no to the first question. If you answer No then go directly to Section 2.

If you have answered Yes then please complete the table and tick boxes with the relevant information. You will also be required to provide further details of these schemes in section 2. Separate forms will be required for each different pension scheme you require us to seek transfer details from. If you elect not to transfer any previous Public Sector Pensions then we may ask you to provide evidence of this membership.

Section 2 – Transferring Other Pension Benefits Not Covered in Section 1

This section is to be completed with further details of your previous pension scheme if you have completed Section 1, or if you have any other pensions that are not covered by Section 1. These will normally be occupational pension schemes, or private personal pensions administered by trustees, or corporate pensions providers. We will require as much detail as possible and you should ensure that your current personal details, such as address and names, match the records held by your former pension provider.

You should complete a separate page for any different pension schemes you wish to transfer from as we will require separate mandates for each scheme.

Section 3 – Personal Details

These details will be used to ensure that the details held on our system match your records. In some instances the address provided by your employer may have changed by the time you submit this form. If we require further information we will contact you by telephone, or email, and you should ensure that your email address is correct and written clearly.

Section 4 – Declaration / 3rd Party Mandate

This section will be used as a mandate to request transfer details from the former pension provider and should be returned to us. You should note that most former pension providers will not accept an electronic or digital signature. You may complete the form electronically, but your signature must be hand written for verification purposes. Photographed copies of the form are not allowed as this media may not be acceptable to your former pension provider.

In some instances your former pension provider may not provide details to SPPA even with your written consent. They will either not provide this information or send this to your home address. In some instances we may send you a transfer pack which you should use to request your transfer details directly from the former pension provider. Any transfer documentation you receive should then be forwarded to SPPA immediately.

Any incomplete forms will be returned and will delay the transfer process. Delays may result in a less beneficial transfer of your pension.

