



## Pensions

Hesketh House  
200-220 Broadway  
Fleetwood  
Lancashire  
FY7 8LG

### NHS Pension Scheme - Change of employment details

Surname

Other names

Date of birth 

Day	Month	Year

Start date 

Day	Month	Year

The information over the page gives changes to this person's employment details.

Signature

Date

EA/GP stamp

Pension Scheme reference number

National Insurance number

Last day of membership, or last year end shown on SD55 

Day	Month	Year

EA/GP Code

EA/GP Reference

Employment identifier from Box 18 of SD55, if not known leave blank

Enter the year to be amended

**Please turn over**

**Box number as shown on SD55**

**23. Contribution rate**

%
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**Revised total**

**24. Employee conts** (no AVCs) - Enter new total of basic employee conts.

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**25. Employee Pensionable Pay** - Enter new amount.\*

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**26. Employer conts** - Enter new total of employer conts.

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**27. Employer Pensionable Pay** - Enter new amount.\*

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**28. Employees Gross Pay.** Enter revised amount.

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**29. Employees Annual Rate of Pensionable Pay.** Enter revised amount.

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**30. AVC's paid (no money purchase)** - Enter new total.

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**31. Non-pensionable days** - Enter number

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**32. Part time staff.** Enter new total of pensionable hours or paid sessions.

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**33. Additional pension 1** Identifier 

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 Conts 

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 Instalments 

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**34. Additional pension 2** Identifier 

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 Conts 

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 Instalments 

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**35. Additional pension 3** Identifier 

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 Conts 

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 Instalments 

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**36. NI earnings.** Enter the **revised** amount of employees contracted-out NI earnings between lower and upper earnings limit in tax year of termination. 

								0		0
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**37. NI earnings.** Enter the **revised** amount of employees contracted-out NI earnings between lower and upper earnings limit in tax year **before** termination. 

								0		0
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**38. Enter arrears of AVC's** (no money purchase). Enter the **revised** amount of arrears outstanding. 

3		7								
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**39. Arrears of contributions.** Enter the **revised** amount of arrears outstanding. 

3		8								
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**40. Revised last day of membership.** Box 36 **must be completed.**

Day	Month	Year			

\* **For retrospective payments:** a) Practitioners - insert year **paid** not year **earned**.  
b) Officer - insert year **earned** not year **paid**.