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| NHS PensionsPO Box 683, Unit 5Newcastle Upon TyneNE5 9EE |  | *Your address:*      |

**Form SM27C – Membership enquiry with NHS Pensions**

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| I have read and understood both the Membership record and Standard membership enquiry factsheets and wish to query my employment details. *Please tick this box:*  | [ ]  |

My details for the period my enquiry relates to, are shown below.

|  |  |
| --- | --- |
| Title (e.g. Mr, Mrs, Miss, Dr) |       |

|  |  |
| --- | --- |
| Surname |       |

|  |  |
| --- | --- |
| Former surname (if applicable) |       |

|  |  |
| --- | --- |
| Other names |       |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of birth |   |   | / |   |   | / |   |   |   |   |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| National Insurance number |   |   |   |   |   |   |   |   |   |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NHS Pension Scheme membership number (if known) | SD |   |   | / |   |   |   |   |   |   |

|  |  |
| --- | --- |
| Employer payroll reference number (if known) |       |

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| --- | --- |
| Contact telephone number |       |

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| Email address  |       |

|  |  |
| --- | --- |
| Job title |       |

|  |  |
| --- | --- |
| Place of work |       |

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| --- | --- | --- | --- |
| Employment start date |       | Leaving date (if left)  |       |

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|  NI number  |   |   |   |   |   |   |   |   |   |

**Details of pensionable membership you wish to query.**

Complete this page in duplicate or attach a separate letter if you wish to investigate multiple employments.

|  |  |  |
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| **Query type** | **Information held for you by NHS Pensions** | **Details you believe should be held for you** |
| **Missing membership**  | *(Employment is missing)* | I worked from       to       |
| **Start date**  | Records show I started on       | It should show from       |
| **Leaving date** | Records show I left on       | It should show I left on       |
| **Annual hours/sessions***(Financial year runs from 1 April to 31 March)* | Financial year ending | Hours/sessions recorded | Financial year ending | Correct hours/sessions |
|       |       |       |       |
|       |       |       |       |
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| **Disallowed days**  | Records show       days | It should show       days |
| **Added Years credit** |       years       days | It should show       years       days |
| **Transfer in credit** |       years       days | It should show       years       days |
| **Last known name and address of the NHS employer** |       |

Please confirm if you can provide supporting documentary evidence and complete the declaration below.

|  |  |
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| [ ]  | I have included all relevant supportive evidence I hold and the payslip summary sheet where necessary. |

|  |  |
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| [ ]  | I do not hold any supportive documentary evidence I can provide. |

I declare that the information I have given is correct and complete.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |       | Date: |       |

**Note**: all third party requests must include a signed letter of authority from the scheme member.

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|  NI number  |   |   |   |   |   |   |   |   |   |

If you are supplying multiple payslips to support your enquiry, please number them in date order of each employment being queried and complete the requested details below.

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| **Payslip Summary sheet** |
| Start and end date of employment being queriedFor example;*01/01/2006 to 10/08/2008* | Payslip number*1* | Date shown on payslip*January 2006* | NHS Pension contributions shown*£50.00* |
|       |       |       |       |
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You can print additional sheets if required.