

Please fill in **both sides** of this form in **black ink** and in **CAPITAL LETTERS** and send it to us. You are allowed one switch on 1 April and 1 October in any year and your form must be received at least 3 months beforehand.

Section 1: Details about you

Your full name:*

Date of birth:*

 / /

Marital status:*

Your Department / Employer:*

National Insurance Number:*

Your full office address:*

Your daytime telephone number:*

Your e-mail address:

* This information is necessary in order to complete your application.

▶ **Go to Section 2**

Section 2: Your PCSPS(NI) pension scheme history

Have you belonged to the PCSPS(NI) before?

(Including any previous membership of nuvos or the partnership pension account during your current period of employment). Do not include details of your current arrangements.

YES - complete this section

NO - ▶ **Go to Section 3**

Period of service

From

To

Employer

What happened to your pension benefits? (see list below)

 / /
 / /

 / /
 / /

A: No pension benefits. **B:** Preserved pension for payment at age 60.

C: Preserved pension for payment at age 65 **D:** Pension transferred out.

E: Pension now in payment. **F:** Took early retirement. **G:** Other (Give details).

Partnership Pension Account

If you have had a partnership pension account during your current employment, please give dates.

From

To

Provider

 / /
 / /

 / /
 / /

▶ **Go to Section 3**

Section 3: Your pension switch

- I would like to join the **nuvos** pension scheme. ▶ Go to section 4
- I would like a **partnership** pension account. ▶ Go to section 5

Section 4: Your nuvos pension choice

Only fill in this section if you are choosing to join nuvos.

- Please contact me about the possibility of transferring my pension from another employment or from the partnership pension account. I understand that time limits apply.
- Please send me information about increasing my pension benefits.
- Please send me a printed version of the booklet 'Pensions for partners'.
(Please note that if you want your partner to be paid a pension after you die, you must complete a Partners Declaration Form.)

▶ Go to Section 6(a)

Section 5: Your partnership pension choice

My choice of pension provider is (tick **one** provider only):

Scottish Widows

Standard Life

TUC

I would like to make contributions at the rate of % of my pensionable earnings.

Please make sure you fill in an application form from your chosen provider and enclose it with this Pension Switch form.

▶ Go to Section 6(b)

Section 6: Benefit statements

- (a) We will send you a benefit statement each year which will include information about your PCSPS(NI) pension benefits. If you want to know about your State pension benefits please contact The Pensions Service within the Social Security Agency for Northern Ireland. Visit their website for further information:

www.dsdni.gov.uk

- (b) If you choose a partnership pension account your provider will send you a statement.

▶ Go to Section 7

Section 7: Your authorisation - you **must** sign and date this form

Signed:

Date: