

**Auto-enrolment pension questionnaire & options form**

Please only tick one of the options 1-6	Please Tick
Option 1- I hold a full-time pensionable post at another Trust (If this is the case, then you are not eligible to pay pension on your employment with us – you do not need to complete an opt-out form [SD502])	
Option 2- I hold a part-time pensionable post at another Trust and my standard hours per week are: _____ (If this the case, then you are eligible to pay pension on all hours paid to you up to the full-time hours for your grade and we will automatically deduct pension unless you complete an opt-out form [SD502])	
Option 3- I am in receipt of an NHS ill health pension (if this is the case you will not be auto-enrolled in to the NHS Pension scheme however, if eligible, you will be auto-enrolled in to the NEST alternative pension scheme)	
Option 4-- I am a retired pensioner from the 1995 NHS Pension scheme (if this is the case you will not be auto-enrolled in to the NHS Pension scheme however, if eligible, you will be auto-enrolled in to the NEST alternative pension scheme)	
Option 5- I am not eligible to join the NHS Pension scheme for a reason other than given in options 1-4 above. Please state reason:	
Option 6-None of the above 5 options apply (If this is the case, then you are eligible to pay pension on your employment with us and we will automatically deduct pension unless you complete an opt-out form [SD502]. This form can not be signed until after you have commenced employment with the Trust)	

**Pension questions (please answer all questions and circle correct answer)**

<b>Q1</b>	<b>Do you have any existing pension rights that you would be interested in transferring into the NHS Pension scheme?</b> If your answer is 'yes' please contact the Trust's pension officer within 12 months of commencing employment with the NHS.	Yes	No
<b>Q2</b>	<b>Do you have any AVC arrangements in place through the NHS Pension Scheme with Prudential or Standard Life?</b> If your answer is 'yes' then please contact your provider to ask them to supply details so that the payroll deduction can continue.	Yes	No
<b>Q3</b>	<b>Do you have an added years contract or NHS Additional pension purchase in place?</b> If your answer is 'yes' please provide the Trust's pension officer with a copy of the contract.	Yes	No
<b>Q4</b>	<b>Have you previously been made redundant from an NHS Employer?</b> If 'yes' please provide further details below.	Yes	No

Date of redundancy		Name of NHS Employer made redundant from	
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Name (please print)	
Signature	
Date	