

# **NHS Pensions - Application to contribute to the NHS Pension Scheme under a Section 7(2) Direction (SD65)**

## **Important notes for the Direction Employer**

Access to the NHS Pension Scheme is only available to an employee who fully satisfies the criteria detailed in a section 7(2) direction ('the direction document').

An eligible employee must make an application to contribute to the NHS Pension Scheme within 3 months of the date of commencement of the relevant employment. As such this form should be given to the eligible employee at the earliest opportunity.

The employee may only commence contributions in accordance with the effective date as detailed in the direction document.

## **Important notes for the Employee**

If your employment fully satisfies the criteria detailed in a section 7(2) direction ('the direction document') you may make an application to contribute to the NHS Pension Scheme.

This form is your application to pay contributions into the NHS Pension Scheme.

You must return the completed form to your employer within 3 months of commencing employment. If your application is late it may have to be turned down.

## **Notes for Medical School Employment Only**

You may only apply to contribute to the NHS Pension Scheme if your employment is in that part of the Medical School in which instruction is given to Medical or Dental students only, or in a post graduate institute for medical or dental research.

You cannot contribute to the NHS Pension Scheme if you have been transferred from the NHS to the Medical School under a NHS Re-organisation initiative.

**Part 1 To be completed by the employee**

Membership Number (if you know it)

SD			/								
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National Insurance number

--	--	--	--	--	--	--	--	--	--	--	--

**To**

Name of your new employer

--

Address of your new employer

Post code

Surname

--

Former surname (If applicable)

--

Other names

--

Date of birth

		/			/						
--	--	---	--	--	---	--	--	--	--	--	--

Name of last place of NHS work

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Full address of last place of NHS work

Post code

That job ended on:

		/			/						
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Did you contribute to the NHS Pension Scheme during this employment?

Yes

No

If 'No' did you opt out of the NHS Pension Scheme?

Yes

No

Did you take out an AVC contract in this previous NHS employment?

Yes

No

I do not wish to pay contributions to the NHS Pension Scheme

I want to pay pension contributions during my present job as:

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which started on:

		/			/						
--	--	---	--	--	---	--	--	--	--	--	--

Signature

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Date

		/			/						
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**How we use your information**

The NHS Business Services Authority – NHS Pensions will use the information provided for administering your NHS Pension Scheme membership and processing payment of your NHS pension benefits. We may share your information to administer and pay your NHS pension, enable us to prevent and detect fraud and mistakes, for debt collection purposes, or as required by law. For more information about who we share your information with and how long we keep your personal data and your rights, please visit our website at [www.nhsbsa.nhs.uk/yourinformation](http://www.nhsbsa.nhs.uk/yourinformation)

**Now send this form to your new employer**

## Part 2 To be completed by the employer

Membership Number: SD   /

EA code

Date form given to officer   /   /

Date form received from officer   /   /

Date job started (If this is more than 3 months ago please attach an explanation for the delay)   /   /

Working: Whole-time  Part-time  - give proportion of whole-time 

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

 ie 

20	00
37	50

National Insurance No.

Was this employee compulsorily transferred to your employment as part of a TUPE or TUPE like arrangement?

Yes  No

I can confirm that I have submitted the joiner details via:

1.ESR  2.POL  3.Excel Spreadsheet  4.ASCII  5.SS10 form

(If selecting this option, please attach to this form)

Date of input   /   /

Name of employer

Address of employer   
  
  
Post code

Signature

Date   /   /

Now send this form to:

NHS Pensions, PO Box 2269, Bolton, BL6 9JS

Employer Helpline: 0300 330 1353  
Customer Contact Centre: 0300 330 1346

### For Medical School Employment Only. Please tick the box which applies

Does this person contribute to the Universities Pension Scheme during this employment? Yes  No

Has this person been transferred to the Medical School from the NHS under NHS re-organisation? Yes  No

Will this person be employed by that part of the Medical School in which instruction is given to Medical or Dental students only or, in a post graduate institution for medical or dental research? Yes  No

**Part 3 To be completed by NHS Pensions**

Membership Number: SD   /

Officer wishes to contribute to the NHS Scheme whilst employed at:

Officer does not wish to contribute to the NHS Scheme whilst employed at:

EA Code

1. Was the request made in time?
  - Yes  go to question 2
  - No  send rejection letter to employer and sign and date below
  
2. Is the officer entitled to contribute?
  - Yes  go to question 3
  - No  send rejection letter to employer and sign and date below
  
3. Have leaving details/confirmation of 'access to the scheme' been received from the previous employer?
  - Yes  go to question 4
  - No  obtain from previous employer

Previous EA code     Telephone No.

Date that previous employment terminated   /   /

4. Date this employment commenced   /   /

If overlap, enter date when pensionable   /   /

5. Prepare acceptance letter SM324  SM324 prepared
6. Have joiner details been received?
  - Yes  Submit form for input (if SS10 attached)
  - No  Refer SD65 to DMT

Assessor's signature

Date   /   /

Checker's signature

Date   /   /