

LOCAL GOVERNMENT PENSION SCHEME

ELECTION TO JOIN – MAIN SCHEME

If you would like to join the Scheme, complete the details below and then return this form to your Employer's payroll department. Please note that membership cannot commence until the first day of the pay period following receipt of your election.

ELECTION TO JOIN THE LOCAL GOVERNMENT PENSION SCHEME

Please complete the following in BLOCK CAPITALS

Surname First name(s)

Previous surname(s), e.g. maiden name (if applicable)

Date of birth National Ins. No.

Home address

Employer

Employment (e.g. job title)

Place of employment

Date of appointment

I wish to join the Local Government Pension Scheme. Please accept this as my election to join.

Signed Date

When completed, both pages of this form should be returned directly to your employer's payroll department.

The Staffordshire Pension Fund website contains extensive information about the pension scheme, however if you would like further assistance please feel free to contact us:



pensions.enquiries@staffordshire.gov.uk



01785 278222

FOR OFFICE USE ONLY

To be completed by the employer before sending to Pension Services.

Please tick the relevant boxes:

I confirm that pension deductions have been made from (this should be from the first day of the month following the date of election)

I enclose a copy of the Starters Form (PEN APT 1)

Name

Job Title

Signed Date

On behalf of the employer