The Local Government Pension Scheme Pension membership form



Please ensure that you complete all details below as requested to ensure that your membership is processed as efficiently as possible. If you have any questions, please feel free to contact us via the correspondence at the base of this form, otherwise please pass the completed form to your HR Frontline / Payroll department.

First names:						Surn	ame:					
Title:	Mr		Mrs		Miss		Ms		Other			
Any previous name	es, including m		L									
Partnership statu	s: Single	Married partners	/Civil ship	Div	orced / D tnership	issolved		Widow(er) oartner	/ Survivin	⁹ 🔲	Cohabitin	ıg 🔲
Please enclose ph - Birth certificate - Marriage certific		the follo - Partne - Civil p	r's birth	certifica	ate	Failure			ay the pay			ts:
NI Number:							Da	ate of birt	h:			
Address:												
							Po	st code:				
E-mail address:							Te	l No:				
Employing autho	ority:											
Employed as (job	title):											
Employment star	t date:											
Contracted week	ly hours:					ontract	ed weel	ks per ye	ar:			
If you hold more including; job de	•					•	•		letails of t	he oth	ier positio	n
Do you have previous local government service? If so, please see 'Part A' overleaf.												
Do you have pen	sion rights el	sewhere	? If so ple	ease see	'Part B'	overlea	f.					
Signed:								D	ate:			

Declaration of previous pension rights.

Please use Part A and / or Part B to inform us of any previous pension rights that you have accrued.

Part A - Previous Local Government service

Pension at https://mypension.dorsetcouncil.gov.uk/

	Service		Type of award + Policy number E.g. refund, transfer, preserved benefit,
Previous Local Government employer	From	То	retirement
If you were paying additional contributions pleas	e tick the approp	oriate box;	
Freestanding AVC Additional year	s \square	Additional R	egular Contributions (ARC)
Scheme AVC			ension Contributions (APC)
zeneme Ave z/ooms mereus		, additional i	ension continuations (, ii e,
Part B - Other previous pension rights ((Non Local Go	overnment)	
Employer or personal pension provider +	Service		Type of award + Policy number
address	From	То	E.g. refund, transfer, preserved benefit, retirement
If you would like to be sent information about the			
County Pension Fund, please tick the box below	and we will send	you a Transfer I	nformation Booklet.
The option to transfer service in must be made	e within 12 mon	ths of joining t	he Scheme.
•			
I would like to investigate the possibility of tran	sferring previou	s pension rights	(please tick this box).
I confirm that I have disclosed my previous pe	nsion rights to t	the best of my l	knowledge.
Signed:			Date:
<u> </u>			
Online access to your pension record			
Using My Pension, the Dorset County Pension Fu	nd's secure onlir	ne pension webs	site, you are able to check your
pension record online and update your personal		•	•

Using My Pension you can keep your Expression of Wish for any lump sum payment made in the event of your death updated. It is important to update your Expression of Wish should your personal circumstances change. Please note that the Dorset County Pension Fund retains absolute discretion with regards to the distribution of the benefits.