

Public Service Pension History

You may be eligible for some protections if you:

- have service in another UK public service pension scheme that includes a period which falls before 1 April 2012 (McCloud Remedy Protection)
- transfer in pension rights from a UK public service pension scheme or combine your existing Local Government pension rights.

You must not have had a continuous break of more than 5 years in either UK public service pension scheme or LGPS (NI) service depending on the type of protection, for one or both protections to apply to you.

To identify if these protections apply, please provide a history of any public service pension scheme membership that you may have. A public service pension scheme includes those providing pensions for civil servants, teachers, health service workers, fire and rescue workers, police and local government workers. You do not need to complete this form if you do not have any other public service pensions service.

Please complete this form and email to – datacollection@nilgosc.org.uk

Section 1 – Your Current Details

Surname

First name

NILGOSC reference number

Personal email address

Employer

Telephone number



Section 2 – Public Service Pension History

Please complete a new row for every period of public service pension scheme membership even if you have two separate periods of membership at the same employer. If you have more than three periods of public service pension scheme membership please continue on a separate form.

Name and address of your previous public service pension schemes and any pension reference number	Pension scheme membership start date (dd / mm / yyyy)	Pension scheme membership end date (dd / mm / yyyy)	Did you receive a refund of contributions when you left?	Has this pension been transferred to another provider?	If transferred, state name of new provider
			☐ Yes ☐ No	☐ Yes ☐ No	
			☐ Yes ☐ No	☐ Yes ☐ No	
			☐ Yes ☐ No	☐ Yes ☐ No	

I authorise NILGOSC to obtain any information it requires in connection with my pension benefits from any of my former pension schemes of which I have been a member. The information I have provided is accurate and complete to the best of my knowledge and belief.

Signature*

Date

** By typing your name you are signing this form electronically. You agree that your electronic signature is the legal equivalent of your manual signature.*