

**Pension Re-Enrolment
Existing Members Enrolment form**

This form should be completed for employees who:

- Have previously opted out of the pension scheme,
- Already hold an existing pension record,
- Are being auto enrolled or re-enrolled,
- Have elected to join the pension scheme, or
- Have started a new post/employment and require their pension record updated.

Please complete in BLOCK CAPITALS

Name of Employer/School _____

Employee's Full Name: _____ Title _____

National Insurance Number: _____

Date of Birth: ___/___/_____ Marital Status: _____

Address: _____

Email address: _____

Post Details

Job Title: _____

Payroll number: _____ Employee reference: _____

Date current pension contributions commenced: ___/___/_____

Actual Hours Worked per week: _____

Contractual Hours for a Full Time employee (eg 35, 36): _____

Term Time Only % if applicable : _____

Contribution and pay details

Contributions rate: _____%

Annual Actual Pensionable Pay: £ _____

Important notes

Please ensure that the correct date is provided.
 Do not provide the employee's original historical employment start date, unless this relates to the current employment.
 Incomplete forms may delay the setup or update of the pension record.

Signed: _____ Date: _____

Name: _____ Tel no: _____

Employer/School: _____ Pension Fund: _____