

Election to Opt Out and/or Application for a refund of Teachers' Pension Contributions

Purpose

This form should only be completed by those eligible to join the Northern Ireland Teachers' Pension Scheme who decide they **do not wish to be a member of the scheme**. No further teaching employment will be pensionable until this election is revoked by the applicant submitting an election to opt back into the scheme.

Members who do not wish to be in the scheme, and who do not qualify for pension benefits, may be able to claim a refund of contributions once they have been out of pensionable employment for more than one month.

For those currently in employment in a DE paid school, Part A and B must be completed and the form returned to Teachers' Pensions Branch by the Teacher. For those currently in employment in a **non** DE paid school, Part A, B and C must be completed and the form sent to Teachers' Pensions Branch by the employer.

Please complete in CAPITAL letters.

PART A - To be completed by the applicant in all cases

Section 1

Name of school: _____

School Ref No: _____ Teacher's Ref No: TR _____

Surname: _____ Mr ☐ Mrs ☐ Miss ☐ Other

Previous Surname(s): _____

Forename(s): _____

Date of Birth: _____

Address: _____

Postcode: _____

E-mail address: _____

Home Tel. No. _____

Mobile No. _____

Please tick here if you wish to claim a refund of superannuation contributions (if eligible) and complete Section 2.

☐

Section 2: Payment details

Please pay my refund to:-
(Please tick appropriate box)

Bank

☐

Building Society

☐

**Name of Bank/
Building Society
Branch**

Sort Code

			-				-		
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Bank account number

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**Building Society Roll
Number**

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Address

Post Code

PART B - Election Confirmation - to be fully completed, signed and dated by the applicant in all cases

I elect for any employment I undertake from the effective date of this election not to be treated as pensionable employment. I understand that, if my election is accepted, I will not be able to claim any form of benefit from the Northern Ireland Teachers' Pension Scheme in respect of any employment covered from the effective date of this election.

PLEASE EXPLAIN BRIEFLY
YOUR REASONS FOR
OPTING OUT OF THE
NITPS

By opting out of the NITPS I will forfeit the right to the following scheme benefits in respect of future service:

- + my employer contributing 29.1% of my salary towards the cost of benefits;
- + a guaranteed pension at normal pension age;
- + the option to take a tax free lump sum
- + pension value protected through full index linking;
- + access to ill-health benefits, should I become permanently unable to teach;
- + children's and dependants' pension
- + in-service death grant.

I have read and understand the points above.

Signature: _____ **Date:** _____

PART C - To be completed by the Employer if not employed in a DE paid school

Note for the Employer

- + When the application is made within 3 months of the contract commencing the 'Effective date of election' is the first date of employment.
- + When the applicant signs and submits the form more than 3 months after commencing pensionable employment, the 'Effective date of election' is the first day of the next month. In such cases pension contributions must have been deducted for the period prior to the opt-out.

Date of Appointment: **Effective date of Election:**

Have pension contributions already
been deducted from salary?

Yes	No
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If yes, from to

National Insurance Information: Please enter below the amounts of National Insurance contracted-out earnings for the last two tax years of the teacher's employment. The amounts will be the teacher's earnings between the lower and upper earnings limits, on which the employee's contributions, calculated according to N.I. Contribution tables, at the contracted-out rate were paid. Failure to provide this information may jeopardise the payment of any refund of superannuation contributions claimed by the teacher.

	Year	£
Tax Year of Termination		
Preceding Tax Year		

I confirm that any pension contributions deducted in respect of service undertaken from the opting-out date will be refunded.

Employment undertaken from the date shown above will not be treated as pensionable. Superannuation contributions will no longer be deducted.

Employers Signature: _____ Date: _____

PART D - To be signed by Applicant and Witness (only to be completed if you have opted to claim a refund).

Declaration - to be signed by the Applicant

- + I confirm that I am no longer in pensionable teaching service and that I have less than 2 years total pensionable teaching employment.
- + I understand that, if the contributions are repaid to me, the period(s) represented by those contributions will no longer be reckonable under the Northern Ireland Teachers' Pension Scheme and cannot be reinstated.
- + I apply for a refund of my teacher's pension contributions.

Signature: _____ Date: _____

Attestation - to be signed by a Witness who must not be related to the applicant

I certify that the applicant, whom I believe to be the person to whom the foregoing particulars relate, signed this declaration in my presence.

Signature: _____ Date _____

Address _____

Tele. No. _____

Now please return the completed form direct to:

***Department of Education, Teachers' Pensions Team,
Orchard House, 40 Foyle Street, Londonderry, BT48 6AT
Telephone: 0300 0770 330***