

## Form 1 Post-retirement employment

### Election Form to Backdate Membership of the Teachers' Pension Scheme (TPS) in cases where a claim has been lodged with an Employment Tribunal.

**THIS IS A LEGALLY BINDING AGREEMENT TO COMPROMISE YOUR CLAIM IN THE EMPLOYMENT TRIBUNAL MADE BETWEEN THE PARTIES TO THAT CLAIM.**

Forenames .....

Surname ..... Title: Mr/Mrs/Miss/Ms/Other .....

Date of Birth .....

NI Number .....

Home address.....

.....

Teachers' Reference Number .....

Having considered the relevant merits of backdating membership of the Teachers' Pension Scheme and the terms of the settlement, I hereby elect to purchase:-

- a) none of my eligible part time service [please tick if appropriate]
- b) all of my eligible part time service [please tick if appropriate]
- c) part of my eligible part time service [please enter number of calendar years you wish to purchase] (see **Note** below)
- d) I wish consideration to be given to my part time service since 1 April 2000 being treated as pensionable under the terms of the Teachers' Pensions Regulations 1997 (subject to employer agreement) [please tick if appropriate]
- e) I do not wish my part time service since 1 April 2000 to be pensionable [please tick if appropriate]

..... calendar years

**Note:** As explained in paragraph 33 of the Guidance for Claimants, if you were awarded premature retirement benefits with additional years of service by way of premature retirement compensation (PRC), your employer may decide that the option to settle 'in part' is not open to you.

**PTO**

### **Payment of employee contribution**

**\* Delete as appropriate**

**\* (If still in re-employment and additional benefits not yet payable)** I agree to pay the contributions required to settle this claim by instalments which will be deducted from my salary and if I retire before payment is completed, I authorise the deduction of the balance from the additional benefits due to me under the TPS ie by deduction from any additional retirement lump sum and, if the amount of contributions due exceeds the additional lump sum, by recovering the balance from the additional pension due to me in accordance with the terms of this agreement.

**\*(If re-employment has ceased and additional benefits are payable immediately)** I authorise the deduction of the contributions due from the additional benefits due to me under the TPS ie by deduction from any additional retirement lump sum and, if the amount of contributions due exceeds the additional lump sum, by recovering the balance from the additional pension due to me, in accordance with the terms of this agreement.

**\* Or (in either case)** I agree to make immediate payment of the contributions required to settle this claim in accordance with the terms of this agreement.

I acknowledge that:-

- This completed option form represents a one off, once and for all, decision on my part;
- I agree to the terms of the settlement;
- In making any option to purchase a period of service I am entering into a contractual commitment to pay the required pension contributions and it will not be possible, at some later stage, to withdraw from that commitment;
- If I have decided not to purchase any of my eligible part time service I will not be able to subsequently opt to purchase the service. Similarly if I have opted to purchase only part of my eligible part time service I will not be able to subsequently opt to purchase a further part of my service.
- In the event of change any resultant overpayment of retirement benefits will have to be refunded.

I confirm that I have returned Form 2 to the relevant address shown on that Form.

If I have opted to purchase some or all of my eligible part time service I attach the completed Form 64-8.

If I have opted to purchase some or all of my eligible part time service I confirm that

Please tick as appropriate:-

- a) I WAS NOT a member of a contracted out personal pension Scheme during a part or all of that period; OR
- b) I WAS a member of a contracted out personal pension scheme with .....(name of policy provider) during a part or all of that period and the Appropriate Scheme Contracted Out Number referred to in the policy/scheme Documents was A \_\_\_\_\_ (please enter the ASCON if you have this information available).


Signed ..... Date .....

Upon completion, please return this form to:

[Respondent employer to insert the name and address of the person to whom the completed form should be returned]

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February 2010