# PENSION OPT OUT FORM

**Personal details**

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| First Name……………………………………………… Surname………………………………………………..  National Insurance number **☐☐☐☐☐☐☐☐☐**  Date of Birth **☐☐☐☐☐☐**  Email……………………………………………………… Employer…………………........................................………………………………………………. |

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| **WHAT YOU NEED TO KNOW**   * Your employer cannot ask or force you to opt out. * If you change your mind, you may be able to opt back in. Please speak to your employer if you want to do this. * If you stay opted out, your employer will normally put you back into pension saving once every three years. * If you change your job, your new employer might put you back into pension saving straight away. * If you have another job, your other employer might also put you into pension saving, now or in the future. * This notice only allows you to opt out of pension saving with the pension scheme and employer you have specified above. * If you wish to opt out of pension saving with another employer or pension scheme, you will need to obtain and complete another opt out form from the relevant pension provider.   **DECLARATION**     1. I wish to opt out of pension saving. 2. I understand that by opting out I lose my right to pension contributions from my employer. 3. I understand that by opting out I may have a lower income when I retire. |
| **Signed**……………………………………………………….  **Date**………………………………… |

**The completed form must be returned to your Employer or Payroll Dept**