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.
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| **Signed**………………………………………………………. **Date**………………………………… |

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