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| Flexible Retirement **Application Form** |  |



Before filling in this application:

**Employee must**:

* Read the notes ‘Flexible Retirement Information for members of the Local Government Pension Scheme employers <https://www.oxfordshire.gov.uk/cms/content/flexible-retirement>

**Employee’s manager must**:

* Ensure a reduction of 25% or more to normal pay is possible through a reduction in hours or grade for at least one year.
* Obtain costs for the release of early pension benefits and agree that these costs can be met by the cost centre.

If this application for flexible retirement is agreed the information provided on this form will be used for changes to the contract of employment and for the payment of the employees’ pension.

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| **PART A (for completion by employee)** |
| Full name: Date of birth: |
| Personnel number (please see your payslip): NI Number: |
| Home Address: |

## Current Employment Details

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| --- |
| Job Title: |
| School: |
| Salary grade and current salary: Hours worked per week: |
| Details of any other jobs held with the Council: |

**Change to Current Employment Details (after Flexible Retirement)**

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| --- |
| Job Title: |
| School: |
| Salary grade and salary: Hours worked per week: |
|  |
| Proposed date of change: |

I confirm that I would like to apply for Flexible Retirement and agree that the changes set out above are accurate. I understand that these changes are expected to last for at least one year from the effective date. I have seen my estimate of benefits I am likely to receive on flexible retirement being approved.

**Agreed by the employee (Signed)** **Date:**

### **Part B** **For completion by the Head teacher**

The changes stated above are accurate and are operationally acceptable. This agreement is expected to last for no less than one year from the effective date.

Headteachers name:

Please state whether the post is to be changed to match the hours under this flexible retirement arrangement.

**Yes/No** (delete as applicable)

**Signed (Headteacher): Date:**

Send completed form to: Please send completed form to your Education Personnel Services Caseworker, or to EPS.Consultants@hants.gov.uk

**Part C** **For completion by HR**

Employee’s continuous service start date:

The details contained in the agreement are correct.

Signed (HR Advisor):

**Name of HR Advisor: Date:**

#### Part D For completion by HR

The details of the flexible retirement set out in this agreement

have been agreed/have not been agreed.

Signed: Date:

Name: