



NOTIFICATION OF THE EMPLOYEE'S RETURN TO WORK FOLLOWING AN ABSENCE

Please refer to the Employer Guide before completing this form

Notification of a scheme member returning to work after leave of absence due to:

- A trade dispute [ ]
Unpaid leave of absence (authorised) [ ]
Unpaid leave of absence (unauthorised) [ ]

Name of:
Employer
Employee

National Insurance Number :

Period of Absence - from: to

Have you informed the member they can pay towards covering the 'lost pension' from an authorised absence via an Shared Cost Additional Pension Contribution (SCAPC)?

- YES [ ]
NO [ ]

Unpaid Days Unpaid period from:

Has the member elected to pay Additional Pension contributions to cover the absence? (authorised absences only).

- YES [ ]
NO [ ]

If Yes - Amount of contribution Paid:
Regularly :
Lump Sum:

If Regularly: Start date End Date

The Shropshire County Pension Fund is a Data Controller under Data Protection legislation. This means we store, hold and manage personal data in line with statutory requirements to enable us to provide pension administration services.

For Completion by Authorising Signatory:

Name:
Job Title:
Email:
Date:

Please return this form to:

Pensions Services
Shropshire Council
Abbey Foregate
Shirehall
Shrewsbury
SY3 6ND

COVID 19 UPDATE: A SIGNATURE WILL NOT BE REQUIRED. HOWEVER AS A SECURITY MEASURE, PLEASE ENSURE THAT THE PERSON EMAILING THE FORM TO US IS ON THE AUTHORISED SIGNATORY LIST.

Or Send a scanned copy to:
pensions@shropshire.gov.uk