



This is a **POSTAL ONLY** form. If you'd like to complete this form online, you can do so via the Knowledge Centre at [www.civilservicepensionscheme.org.uk/
memberhub/knowledge-centre](http://www.civilservicepensionscheme.org.uk/memberhub/knowledge-centre)

Contribution change request form for the partnership pension account & Civil Service Additional Voluntary Contribution Scheme (CSAVCS)

Please complete this form in black ink and in **BLOCK CAPITALS** and return it to your employer's payroll department.

Your personal details

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|-------------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Your name | | | | | | | | |
| Your address | | | | | | | | |
| Postcode | | | | | | | | |
| Your date of birth | <input type="text"/> |
| Your telephone number | | | | | | | | |
| Your National Insurance (NI) number | <input type="text"/> |
| Your pay number | | | | | | | | |

Your contributions

I wish to revise my contribution rate

I wish to cease my contributions

Please confirm the amount you wish to contribute.

If you wish to cease your contribution, enter zero here.

% of pensionable pay per month OR £

per month

Your declaration

Please revise or cease my contribution rate (as detailed above) from my salary from the next available pay period.

Your signature

Date

The scheme is committed to managing your data in line with the Data Protection Legislation. For more information about how your data is managed, please visit:
www.civilservicepensionscheme.org.uk/privacy-policy