



Civil Service Pensions

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

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

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

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