

Irish External Examiner Set-up Form (first claim)

Title:						
Name:						
Address:						
Date of Birth:	P	PPS No.:		PRS	Class:	
Home Phone No.:			Mobile No.:			
Marital Status:			Staff No.:			
Job Title						
Work Address:						
Extension No.:		Ema	ail Address:			

Bank Details

Account No.:	
Sort Code:	
Address of Bank:	

Please return this completed form to:

Payroll Services, Human Resources, House 4, Trinity, Dublin 2 by 12 noon on the 6th of each month to ensure set up in the next payroll. Please note that a External Examiners Re-Imbursement Form should also be submitted with this form. All queries to Extn. 1037 **PRD10 Employment Declaration Form**

Pension-Related Deduction Employment Declaration

Following the implementation of the Pension-Related Deduction with effect from 1st March 2009, staff are required to declare their overall personal pension status with regard to any public service pension scheme. The following details are required to be completed and returned asap to the payroll department.

In Relation to the Public Service Pension Related Deduction

Mai	n Employment	
1.	Are you employed in any other public service body (full-time, part-time or otherwise)? a) If Yes, please give employer nos. of each subsidiary employment	YES NO
2.	Are you a member of a Public Service Pension Scheme? If Yes, please give details of the scheme	YES NO
3.	Do you have, or have you a future entitlement to, a benefit under a Public Service Pension Scheme? If Yes, please give details of the scheme	YES NO
4.	Are you in receipt of a pension from a Public Service Pension Scheme ? If Yes, please give details of the scheme	YES NO
5.	Have you opted out of such a scheme? If Yes, please give details of the scheme	YES NO
6.	Do you receive a payment in Lieu of membership in such a scheme? If Yes, please give details of the scheme	YES NO

Please provide details for additional subsidiary employments overleaf or on additional sheets as required

I certify the foregoing information to be correct to the best of my knowledge and belief, and I undertake to immediately notify the Payroll Department at _______ of any change affecting the details given. I understand that if I am a member of a public sector pension scheme or have a future entitlement to a benefit under such a scheme that I will be liable for the pension-related deduction at the appropriate rate.

Signature:	Date:
Name:	Employer:
Personnel/Works No.:	PPS No.:

PLEASE COMPLETE THIS DECLARATION IN BLOCK CAPITALS (APART FROM YOUR SIGNATURE)

PRD10 Employment Declaration Form

ADDITIONAL SUBSIDIARY EMPLOYMENT 2. If you are a member of a Public Service Pension Scheme: please give details of the scheme 3. If you have, or you have a future entitlement to, a benefit under a Public Service Pension Scheme: please give details of the scheme 4. If you receive a pension from a Public Service Pension Scheme: please give details of the scheme 5. If you have opted out of such a scheme: please give details 6. If you receive a payment in Lieu of membership in such a scheme: please give details **ADDITIONAL SUBSIDIARY EMPLOYMENT** 2. If you have, or you have a future entitlement to, a benefit under a Public Service Pension Scheme: please give details 3. If you have, or you have a future entitlement to, a benefit under a Public Service Pension Scheme: please give details of the scheme 3. If you have, or you have a future entitlement to, a benefit under a Public Service Pension Scheme: please give details of the scheme 4. If you receive a pension from a Public Service Pension Scheme: please give details of the scheme

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