Declaration

On behalf of the school/employer named below I certify that I have completed this form fully and that all details are correct.

I attach the following documents to this notification form (please provide all unless previously sent to the Pensions Shared Service):

• Member's Application to Flexibly Retire	Yes ☐	No ☐
• Your Employer's LGPS discretions Policy	Yes ☐	No ☐
• A copy of the flexible retirement agreement signed by the appropriate Director / Governors as set out in your employer's discretions policy	Yes ☐	No ☐

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Signed _____ Date _____

Name _____ Tel no _____

Job Title _____

Employer/School _____

Pension Fund _____