## **PROFESSIONAL ADDED YEARS**

## **Application Form**

## To be completed by applicant

Please use **BLOCK CAPITALS** where applicable

DΛI	PART 1 – YOUR DETAILS																		
י אי	WIT TOOK DETAIL																		
1	Your PPS No.:											Staff	f Nur	nber	:				
2	Title:	Mr				Ms				М	rs			Oth	er				
3	Surname:																		
4	First name(s):																		
5	Date of Birth: (DDMMYYYY):	Date of Retirment: (DDMMYYYY):																	
6	Address:																		
7	Email Address:																		
PAI	PART 2 – SERVICE DETAILS & GENERAL INFORMATION																		
1	1 Date of entry to Institute of Technology/TU Dublin:																		
2	Title of post being examined for award:																		
3	Date of appointment to post being examined for award:																		
4	Minimum entry age, if any, for the competition from which you were recruited:																		
5	Minimum qualifications specified as essential requirement for appointment referred to at 2 above:																		

Details of any refund of pension contributions received in relation to any previous pensionable employment:  Give full details of any retained benefits you have i.e. an entitlement to an occupational pension, preserved pension or any other superannuation benefit.  A statement must be included from the individual pension provider outlining the benefit due, the value of the fund if applicable and the date on which benefits will become payable.
Details of any refund of pension contributions received in relation to any previous pensionable employment:
Details of all non-transferable service other than in a public sector body:  This includes all private sector service - please outline exact dates of service
Details of all previous service with another public sector body:  Please include transferred service or any non transferred service and outline exact dates
Minimum number of years experience specified as an essential requirement in competition:
not the actual number of years it takes the applicant to achieve the qualification)
please state your qualifications required for appointment:  (Please note, only the minimum no. of years to obtain qualification will be considered in calculation,

12	In relation to private pensions , please give details of any employer contribution:									
12	Details of any private pension products e.g. AVC's. In cases where they are not 100% privately funded,									
13	Appendix 3 needs to be completed.									
14	In the case of officers on D Rate PRSI, please attach a statement of your potential entitlement to a state pension or									
	a statement of your social insurance contributions arising from contributions paid under the Social Welfare Acts.									
	(This can be obtained by writing to Dept. of Social Protection, College Road, Sligo. )									
	Attach where relevant a statement of benefits from any other country.									
	If there is an entitlement please complete Appendix 3									
15	Details of Notional Service, if any, purchased under the Local Government Superannuation Purchase Scheme:									
I hereby declare that, to the best of my knowledge, the details given in this application form are true and correct.										
Sign	ed:									
Nan	e (Block Capitals):									
Dot										
Date	·									