

**Clinical Lecturer – Additional Information**

Please complete this document and return with your application.

Vacancy Reference Number: \_\_\_\_\_

Name:	
Former Surname:	
National Insurance Number:	
GMC Registration Number:	
National Training Number (if applicable):	
Speciality:	
Clinical Speciality Stage of Training:	
Designated Body for Revalidation:	
Revalidation Responsible Officer (if known):	
Date of PhD Award:	
If PhD not awarded, date of submission:	
If PhD submitted, date of viva and outcome if known:	
Expected CCT date:	
<b><u>Salary Details</u></b>	<b><u>Please attach a copy of your current payslip</u></b>
Present basic salary (excluding supplementary payments)	
Date of next increment (if applicable):	
Cash Floor Protection (NHS) amount:	
Supplementary Payments (e.g. flexible pay premia, academic pay premia):	

Clinical oncall payments:	
Other:	

**Additional information: Pension Scheme**

Date of birth	
Last place of NHS work	
Address of last place of NHS work	
Date last NHS job ended	
SD Number (superannuation division)	
Did you contribute to the NHS pension scheme during this employment Y/N	
If 'No' did you opt out of the NHS Pension Scheme	
Did you take out an AVC (Additional Voluntary Contribution) contract in this previous NHS employment?	
If Yes please provide a copy of your AVC contract	
Do you wish to contribute to the NHSPS in respect of your employment with the University	

I confirm the information supplied is a true record of my current employment details.

Print Name:	
Signature:	
Date:	