Flexible Retirement

Flexible Retirement Application Form

Harlow Council understands that your privacy is important to you. The details you provide on this form will be treated as private and confidential.

Information Note

Flexible Retirement allows you to draw your pension benefits while continuing in your employment with the council. Applicants must be at least 55 years of age, with 2 or more years of pension scheme membership and reduce either the hours they work or their grade. Please note that drawing your pension early may result in a reduction of pension benefits.

Applications for flexible retirement require the consent of EMT. If you request a reduction in hours, it will help the council reach a decision if you provide information on your preferred working pattern. When completing the Business Case section, think about the effect this change will have both on the work that you do and on your colleagues. If your request is granted, this will be a permanent change to your terms and conditions.

Please read the Council's Retirement Policy <u>before</u> completing this form. You should ensure that you submit your application to your line manager at least 3 months before the date you wish the request to take effect. It is important that you complete all the questions to avoid a delay in the process.

Full Name (PRINT):	Payroll No			
Service	Line Manager Name			
Department				
Eligibility and Conditions of Application				
Please tick ☑ to confirm or provide details where appropriate.				
I wish to apply for flexible retirement				
I have 2 or more year of pension scheme meml	pership			
I understand that if approved, I am required to reduce my hours by a minimum of 25% or reduce my grade by at least one grade.				
I understand that flexible retirement involves the early payment of my pension benefits which may, in full or part, be subject to actuarial reduction				
I understand that flexible retirement will constitu until my final retirement date.	ite a permanent contractual adjustment			
I understand all flexible retirements are consident needs and the Council's overall aims and object				

Option 1				
I wish to apply for flexible retirement and reduce my contractual working hours of work by a minimum of 25%.				
My current	contractual hours of	are	per week	
My propose	My proposed contractual hours are per week		per week	
DAYS	HOURS	RS TIMES WORKED		
Monday				
Tuesday				
Wednesday Thursday				
Friday				
Saturday				
Sunday				
-				
Option 2				
I wish to apply for flexible retirement based on a reduction in my salary grade* and maintaining my current working hours. I understand if approved I need to successfully secure via a recruitment process an alternative position, at least one grade beneath my current contractual grade. *Reduction in salary grade - This may emerge as part of a service restructuring or through application for another job in the Council. You will have to seek prior approval for flexible retirement. You should identify during application stage that you wish to apply for the (lower graded) position as part of a flexible retirement request.				
Commencement I am providing a minimum of 3 months' notice and request my flexible retirement				
takes effect from (state date)				
Business Ca	se – Employee			
For flexible retirement to be granted by EMT it should be mutually beneficial to both the employee and				
the council. Please detail below how you think your request for flexible retirement would be mutually				
beneficial to b	ooth you and the cou	incil.		
Other releva	nt information			
If applicable, please include detail of any welfare or wellbeing issues that are pertinent to your request				
Confirmation of Application request				
Employee	Signature:		Date:	
Once complete pass this form to your line manager along with any supporting documentation				

Please complete either Option 1 or Option 2		
Employee:		
Please detail below how you think your request for flexible retirement would be mutually		
beneficial to both you and the council. How you think your request for flexible retirement will impact on the council, if granted and how that impact could be dealt with. Consider the cost, impact of any proposed new work pattern on the Service, ability for Service to continue to perform, staff resources etc		

Line Manager: Name
Business case for initial consideration by the Assistant Director of Service setting
out the savings to be achieved, as appropriate, should the request be granted
and providing details of how work will be reallocated within the department/team.
Strain Payment: Essex Pension estimate (from HR) £
Line manager: Signature:
Director: Name
Director. Name

Business case:
Director: Signature:
To be submitted to Natasha Tarrell Director HD and OD
To be submitted to Natasha Terrell - Director HR and OD prior to submission to EMT
F
Natasha Terrel: Signature:
Human Resources to submit to EMT for inclusion on their Agenda