

If you have more than one occupation, please complete the question set again. For more than two occupations, please provide the information required on a separate document or in the email/letter to our Member Service Team.

1. Employment and duties (*please tell us about your new employment circumstances*)

a) Job Title

b) Duties (*please list*)

2. Date these changes came into effect / /

3. Does your new employment involve work outside of the UK? Yes No

If 'yes' please provide details of where, duration and frequency

4. How many days a week will you work in your new employment? days

5. Please state your new annual work earnings

Employed (*gross salary*) £

Self-employed (*your pre-tax earnings if known*) £

Self-employed (*your anticipated* pre tax earnings, if actual earnings not yet known*) £

*Please note that any claim benefit payable will be based on actual earnings, not anticipated earnings

Partnership (*your pre-tax earnings*) £

If 'partnership' your percentage share of this profit %

Employed as a Director within a private limited company with not more than 3 other shareholder directors (*gross salary*) £

If applicable, dividend payments received from the company's normal regular business / normal trading activities in the last 12 months £

6. Are you entitled to any earnings from work if you are off work due to illness or accident? Yes No

If 'yes' please confirm how much you would receive and for how long

7. Please provide a split of time spent working for each occupation

Occupation 1 %

Occupation 2 %

Signature

Date / /

Print Name

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