

# Career Break Application



This form should be used to request a career break.

Employees should read the [NHSScotland Career Break Policy](#)<sup>1</sup>. It is important that you understand the terms of the arrangement before completing this form. You should meet with your manager to discuss your initial plans for taking a career break.

**For digital signature functionality, please open this form in Adobe Acrobat. Viewing this form in a browser may not support signature features.**

## Section 1: To be completed by the employee

### Personal details

Name

Payroll number

Job title

Department

Grade / band

Work base

Home address

Home telephone number

Mobile number

Please state reasons for career break

## Career break details

**Proposed start date of career break** (dd/mm/yyyy)

**Proposed length of career break**

1. I have at least 12 months' continuous service with one or more NHS employers

yes      no

2. I have previously taken a career break

yes      no

If yes, please state total length of career break

3. I am a member of the SPPA Superannuation Scheme

yes      no

If yes, please answer the following statements:

a. I have discussed the implications of my career break with the SPPA

yes      no

b. I wish to pay contributions to the SPPA scheme during my career break for the period I am eligible to do so

yes      no

c. I do not wish to pay contributions to the SPPA scheme during my career break and understand that I must advise SPPA that I do not wish to remain in the scheme

yes      no

**Employee signature**

**Date** (dd/mm/yyyy)

## Section 2: To be completed by the manager

**A.** I confirm that I support this application and I will have a meeting with the employee to discuss and sign the Career Break Agreement

**OR**

**B.** I do not support this application and have stated my reasons below

**Manager signature**

**Date** *(dd/mm/yyyy)*