

RETIREMENT DECLARATION

* I shall retire from active professional practice on _____

* I shall retire from the N.H.S on _____

* I retired from active professional practice on _____

* I retired from the N.H.S on _____

I have retired from my full-time consultant/academic post and I confirm that I will not be in receipt of income from continuing professional sources in excess of 10% of the basic full-time N.H.S salary (approx £9,000 at the moment). If such income exceeds this amount I will notify the College.

Name
(Please complete in block capitals)

Date

Membership Reference No.

Please return this form to the Membership Office at the College

* *Delete whichever does not apply*

SIGNATURE **DATE**

DATA PROTECTION STATEMENT

The College's Data Protection Statement can be viewed at <http://www.rcpsych.ac.uk/dataprotection>.

