

Guidelines – How to fill out the application form for an exemption from the German Statutory Pension Insurance

Please fill in your original application form completely and sign it personally. Otherwise there may be delays in processing your application and hence you may miss important deadlines regarding your exemption. Many thanks!

Point 2: Information regarding your employer / client

2	Angaben zum Arbeitgeber / Auftraggeber
Firmenname, Name, Vorname des Inhabers	→ Details of employer / Client
Firmenadresse (Straße, Hausnummer)	→ Company Address, Street, Number
Postleitzahl, Ort	→ Postcode, place

Template

It is very important, that exemptions from the German Statutory Pension Insurance are granted for the actual employer, i.e. Helioskliniken, University Clinics etc. and not from an individual clinics from one of the **affiliated Hospital / Clinic networks**. This will allow you to work in your employer's other clinics, without losing the exemption you have been granted regarding the German Statutory Pension Insurance. This is only possible if the exemption is granted for the overall employer of the clinic you work for, i.e. the organisation that runs the clinic network.

If your employer runs numerous clinics, i.e. is a clinic network, please specify the name of the overriding Hospital / Clinic network when providing the details of your employer.

If you work for a placement agency as part of the temporary employment process, please enter the data of the placement agency and attach a copy of your employment contract.

Point 3: Precise job description

genaue Bezeichnung der Tätigkeit

Template

You should always provide a precise job description. This applies to both typical medical jobs (e.g. ward physician, resident physician, senior physician, head physician) and non-typical medical jobs (e.g. jobs in the pharmaceutical industry, jobs without direct patient contact). For non-typical medical jobs, please also enclose the following with your application: a precise job description/ specification drawn up by your employer or the relevant excerpts from your contract of employment.

Point 3: Specifying your occupation

<input checked="" type="checkbox"/>	Ich bin in der zu befreienden Tätigkeit abhängig beschäftigt. → I am employed
<input type="checkbox"/>	Ich bin in der zu befreienden Tätigkeit selbstständig tätig. → I am self employed

As most people applying for an exemption from the German Statutory Pension Insurance are employees (e.g. a doctor working for a hospital), they will need to mark the first box. However, in some cases, self-employed people may also be subject to the German Statutory Pension Insurance (e.g. teachers or self-employed persons with only a single customer). Should you be self-employed, please provide official documentation from the German Federal Pension Insurance Agency (Deutsche Rentenversicherung Bund) confirming that you are subject to the German Statutory Pension Insurance and enclose it with your application for exemption. If you are unsure whether you are an employee or self-employed, you can ask the German Federal Pension Insurance Agency to carry out an “assessment of your status” (Statusfestellung). Additional information regarding status assessments is available from your pension fund (Versorgungswerk).

Point 4: Profession

4 Berufsgruppe	
<input checked="" type="checkbox"/>	Arzt

Please mark the box for “Arzt” (doctor). Should you be working in two or more jobs at the same time, and both jobs qualify you for an exemption (e.g. doctor and dentist), please use the detailed application of the German Federal Pension Insurance Agency (Deutsche Rentenversicherung Bund). You can find it at this Internet address: https://www.deutsche-rentenversicherung.de/SharedDocs/Formulare/DE/Traeger/Bund/_pdf/V6340.html

Point 5: Specifying your occupation

5 Angaben zur Ausübung der Erwerbstätigkeit	
5.1 Angaben für Ärzte und Zahnärzte → Details for Doctors and Dentists	
Üben Sie eine Tätigkeit aus, bei der ärztliche beziehungsweise zahnärztliche Fachkenntnisse aus der akademischen Berufsausbildung angewendet oder mitverwendet werden?	
<input type="checkbox"/> nein	<input checked="" type="checkbox"/> ja → Do you perform activities, which require medical or dental expertise gained from academic vocational training?

An exemption from compulsory pension insurance is only permissible if there is a connection between membership of a pension fund (Versorgungswerk) and the exercise of a profession. Therefore, it is asked here whether the medical academic vocational training is objectively necessary for the exercise of the profession. This is to be affirmed in any case with representatives of the medical professions if they are active in one of the classic occupational fields of their professional group. For doctors, this includes the performance of medical tasks in a medical practice or in a hospital.

Point 9: Declarations made by the pension fund

This section will be completed by your pension fund. Please do not fill out this section.

9	Erklärung des Versorgungswerks
<input checked="" type="checkbox"/>	Bestätigung der Kammerpflichtmitgliedschaft → Confirmation of compulsory chamber membership (Nicht erforderlich bei Befreiungsanträgen von Apothekern und Architekten im gesetzlich vorgeschriebenen Vorbereitungs- oder Anwärterdienst.) Der Antragsteller ist aufgrund gesetzlicher Verpflichtung Mitglied der Name der berufsständischen Kammer Ärztammer Westfalen-Lippe