****

**EMPLOYEE STARTER FORM**

EMPLOYER FULL NAME:

**EMPLOYEE PERSONAL DETAILS:**

TITLE: MR/MRS/MISS/MS/\_\_\_\_\_\_\_\_\_\_ GENDER (M/F)\_\_\_\_\_\_\_\_\_\_\_\_\_\_MARITAL STATUS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRST NAMES\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH\_\_\_\_ /\_\_\_\_\_/\_\_\_\_\_\_\_\_NATIONAL INSURANCE NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOWN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COUNTY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_POST CODE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PASSPORT No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TEL NO.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYMENT DETAILS**:

START DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DEPT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DIRECTOR: YES/NO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SALARY RATE £\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOURLY RATE £\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HOURS PER WEEK\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DAYS PER WEEK\_\_\_\_\_\_\_\_HOURS PER DAY/WORKING DAYS: M\_\_\_\_T\_\_\_\_\_W\_\_\_\_T\_\_\_\_\_F\_\_\_\_\_S\_\_\_\_\_S\_\_\_\_\_\_

STUDENT LOAN TO BE REPAID - YES/NO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P45 ATTACHED/TO FOLLOW\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYEE STATEMENT:**

**PLEASE CIRCLE ONLY ONE OF THE FOLLOWING STATEMENTS**

**A**  - THIS IS MY FIRST JOB SINCE LAST 6 APRIL AND I HAVE NOT RECEIVED ANY TAXABLE ALLOWANCES, BENEFITS

 OR PENSIONS.

**B**  - THIS IS NOW MY ONLY JOB BUT SINCE LAST 6 APRIL I HAVE HAD ANOTHER JOB, OR RECEIVED TAXABLE

 ALLOWANCES OR INCAPACITY BENEFIT. I DO NOT RECEIVE A STATE OR OCCUPATIONAL PENSION.

**C**  - AS WELL AS MY NEW JOB, I HAVE ANOTHER JOB OR RECEIVE A STATE OR OCCUPATIONAL PENSION.

**BANK DETAILS:**

NAME OF BANK \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BRANCH NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SORT CODE(6 DIGITS)\_\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_\_\_ACCOUNT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACCOUNT NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BUILDING SOCIETY REFERENCE/ROLL NO.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_