

New Employee Starter Form



Employee Details				
Title				
Forename(s)		Middle Name		
Surname		Date of Birth		
NI Number.		Marital Status		
Address (including postcode)				
Home Tel No.		Mobile No.		
Passport No.		Nationality		
Appointment Details				
Job Title		Start Date		
Annual Salary		Monthly Salary		
Pay Frequency (w/m)		Hourly Rate		
Line Manager				
Company Car/Van	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Car or Van	<input type="checkbox"/> Car <input type="checkbox"/> Van
Car Allowance	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Car Allowance amount	
Health Scheme	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
No. Of Holiday Days		P45 Received	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bank Details				
Bank Name				
Bank Address				
Account Name				
Account No.				
Account Sort Code				
For Office Use Only				
Authorised Signature		Name		
Employee No.				

To Be Completed by New Starter

Present Circumstances:

A - This is my first job since 6 April and I **have not** been receiving taxable Jobseeker's Allowance or taxable Incapacity Benefit or a State Pension

OR

B - This is now my only job, but since last April I **have** had another job, or have received taxable Jobseeker's Allowance or Incapacity Benefit. I do not receive a State Pension or Occupational Pension.

OR

C - I have another job or receive a State Pension or Occupational Pension.

Student Loan

Tick if you are required to repay a Student Loan

Signature

Date