New Employee Data Form

Please complete in block capitals

Employee No. ☐☐☐☐ **Department No.** ☐☐☐

Title Mr ☐ Miss ☐ Mrs ☐ Ms ☐ Other _____

Surname ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Forename ☐☐☐☐☐☐☐☐☐☐☐☐

Middle Name ☐☐☐☐☐☐☐☐☐☐☐☐

Gender Male ☐ Female ☐

Marital Status Single ☐ Married ☐ Widowed ☐ Divorced ☐

Address ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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Postcode ☐☐☐☐ ☐☐☐

Date of Birth D D / M M / Y Y **Start Date** D D / M M / Y Y

NI Number ☐☐☐☐☐☐☐☐☐ **NI Code** (If Known) ☐

Payment Type Cash ☐ Cheque ☐ BACS ☐ (If paid via BACS please complete bank details below)

Sort Code ☐☐ - ☐☐ - ☐☐ **Account No.** ☐☐☐☐☐☐☐☐

Contracted Hours ☐☐ per week

Salary Details

Company Director Yes ☐ No ☐ (If yes) **Date From** D D / M M / Y Y

P45 Received (If yes attach copy) Yes ☐ No ☐ OR **P46 Completed** (If yes attach copy) Yes ☐ No ☐