NEW EMPLOYEE FORM

Company/Employer Name:	

Title			
First name			
Surname			
Address			
		Postcode	

Male/Female		**Date of Birth**	
Marital Status		**NI Number**	
Starting date		**Nationality**	

Job Title							
Usual days worked per week	**Mon**	**Tue**	**Wed**	**Thu**	**Fri**	**Sat**	**Sun**
Do you have a Student Loan:	**Yes / No**			**Plan 1 / Plan 2**			

Which statement below applies to you?	
1. This is my first job since last 6 April and I have not been receiving taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit or a state or occupational pension.	
2. This is now my only job, but since last 6 April I have had another job, or have received taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a state or occupational pension.	
ATTACHED P45?	*Yes / No*
3. I have another job or receive a state or occupational pension.	