**EMPLOYEE STARTER FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| This line is for PT staff only. | | | | | | | | | **Dept Code:** | | |  | | | **PT Office:** | | |  | | | |
|  | | | | |  | | | |  | | |  | | |  | | |  | | | |
| The employer must ensure this form is completed correctly. Please answer all questions so we can set up your new employee. It is essential that you inform us if any of the following changes. | | | | | | | | | | | | | | | | | | | | | |
| **Service User’s Name\*:** | | | | | | | | | |  | | | | | | | | | | | |
| *\*This is the person who uses the Direct Payment.* | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | |  | | |  | | |  | | |  | | | |
| **Employer’s First Name\*\*:** | | | | |  | | | | **Employer’s Surname:** | | |  | | | | | | **Title** (Click to select) | | | |
| *\*\*This is the person who will employ the PA. They are sometimes also the service user.* | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | |
| **Employee’s First Name:** | | | |  | | | | | **Employee’s Surname:** | | |  | | | | | | **Title** (Click to select) | | | |
| **Date of Birth** (DD/MM/YYYY): | | | | | |  | | | | | | **Nationality:** | | |  | | | | | | |
| **Address:** | | | | |  | | | | | | | **Gender:** | | |  | | | |  | | |
|  | | | | |  | | | | | | | **Mobile:** | | |  | | | | | | |
| **Town:** | | | | |  | | | | | | | **Landline:** | | |  | | | | | | |
| **Postcode:** | | | | |  | | | | | | | **Email:** | | |  | | | | | | |
| **Employment Start Date:** | | | | | | Click or tap to enter a date. | | | | | | **Number of contract hours per week:** | | | | |  | | | | |
| **Have you included your employee’s P45?** | | | | | | |  | | | |  | | |  | | | | | | | |
| **National Insurance Number:** | | | | | | |  | | | | | | |  | | | | | | | |
| **Passport Number:**  (Required only if employee is not a British Citizen) | | | | | | |  | | | | | | |  | | | | | | | |
| **Where did your employee see this vacancy?** | | | | | | | |  | | | | | | | |  | | | | | |
|  | | | | | | | |  | | | | |  | | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | |
| **Employee statement – the employee must select one of the following statements:** | | | | | | | | | | | | | | | | | | | | | |
|  | | **A** | This is my first job since the last 6th April and I have not been receiving taxable Jobseeker’s Allowance, Employment and Support Allowance, taxable Incapacity Benefit, State or Occupational Pension. | | | | | | | | | | | | | | | | | | |
|  | | **B** | This is now my only job, but since the last 6th April I have had another job, or received taxable Jobseeker’s Allowance, Employment and Support Allowance or taxable 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. | | | | | | | | | | | | | | | | | | |
| **Student loans** – this section is for the employee to complete | | | | | | | | | | | | | | | | | | | |

|  |
| --- |
| **Types of Student Loan** |
| **You have Plan 1 if any of the following apply:**   * you lived in Northern Ireland when you started your course * you lived in England or Wales and started your course before 1 September 2012 |
| **You have a Plan 2 if:**  You lived in England or Wales and started your course on or after 1 September 2012. |
| **You have a Plan 4 if:**  You lived in Scotland and applied through the Students Award Agency Scotland (SAAS) when you started your course. |
| **You have a Postgraduate Loan if any of the following apply:**   * you lived in England and started your Postgraduate Master’s course on or after 1 August 2016 * you lived in Wales and started your Postgraduate Master’s course on or after 1 August 2017 * you lived in England or Wales and started your Postgraduate Doctoral course on or after 1 August 2018 |

|  |  |  |  |
| --- | --- | --- | --- |
| **1.** | **Tell us if any of the following statements apply to you:** | | |
|  | * you do not have any Student or Postgraduate Loans * you’re still studying full-time on a course that your Student Loan relates to * you completed or left your full-time course after the start of the current tax year, which started on 6 April * you’re already making regular direct debit repayments from your bank, as agreed with the Student Loans Company | | |
|  |  | | If yes, go to question 2 |
|  |  | | If no, go straight to the Declaration |
|  |  | |  |
| **2.** | **To avoid repaying more than you need to, tick the correct Student Loans that you have – use the guidance on the right to help you.** | | |
|  | Please select all that apply | | |
|  |  | Plan 1 | |
|  |  | Plan 2 | |
|  |  | Plan 4 | |
|  |  | Postgraduate Loan (England and Wales only) | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employees, for more information about the type of loan you have, go to www.gov.uk/sign-in-to-manage-your-student-loan-balance | | | |
| Employers, for guidance go to www.gov.uk/guidance/special-rules-for-student-loans | | | |
|  | | | |
| **Declaration** | | | |
| **I confirm that the information I’ve given on this form is correct** | | | |
| **Employee Signature:** |  | **Full name:** |  |
| **Date:** | Click or tap to enter a date. |  |  |

|  |  |
| --- | --- |
| **Please complete employee bank details only if the employee is paid directly into their bank account by Penderels Trust. If the employee is paid by the employer, please leave this section blank.** | |
| **Employee Bank Details** | |
| **Account Name:** |  |
| **Name of Bank/Building Society:** |  |
| **Sort Code:** |  |
| **Bank Account Number:** |  |
|  | |
| **Declaration: I confirm the above information is correct** | |
| **Employee Signature:** |  |
| **Date:** | Click or tap to enter a date. |
|  |  |
| **Additional Information:** | |
|  | |
|  |  |
| **PLEASE NOTE YOU ARE NOT EMPLOYED BY PENDERELS TRUST** | |
| Penderels Trust Payroll Bureau processes your wages on the instructions of and on behalf of your employer named at the top of this form. If you have any employment queries, you should discuss these with your employer. | |
|  |  |
| **GENERAL DATA PROTECTION REGULATION (GDPR):** Your details will be kept electronically and as paper files. Information will be provided to both HM Revenue and Customs and the Benefits Agency if requested. It may be necessary to share your information with your employer’s funding authority in accordance with their reviewing and monitoring process. Please sign the confidentiality statement below to confirm you are happy for information to be shared. It will not be shared with any other organisation without your express permission (except where required by law through a statutory duty or order). | |
|  |  |
| **Confidentiality Statement** | |
| I confirm that I am happy for information to be transferred from Penderels Trust to my employer’s funding authority as required for their review and monitoring purposes as detailed above. | |
| **Employee Signature:** |  |
| **Date:** | Click or tap to enter a date. |