

## Employee starter form – employee to complete

All sections must be completed

Employee details	
Bellerbys   ISCs   Embassy   Study Group	(please tick)
Title: Dr  Mr  Mrs  Ms  Miss  (please tick)	Job title
First name	Department
Middle names	Centre
Surname	Date of birth (dd/mm/yyyy)
Known as	Do you have a P45: Yes \( \text{No} \( \text{No} \) (please tick) If no, please complete P46.
Gender: Male  Female (please tick)	National Insurance number
Address	National Insurance exemption: Yes \( \text{No} \( \text{\ (please tick)} \)
	Passport number
	Passport expiry date
Postcode	Passport country of issue
Home telephone number	Nationality
Mobile telephone number	Visa: Yes □ No □ (please tick)
Email address	TRN no (Teachers only)
Name of Bank/Building Society  Name of account holder  Sort code	Account number
Sort code	Account number
Building Society Roll Number (This number must be quoted if account held with a building s	ociety)
Emergency contact information  Please provide details for two people you should wish to be contacted in case of Name 1	an emergency
Relationship	Relationship
Address	Address
Address	Audiess
Home telephone number	Home telephone number
Mobile telephone number	Mobile telephone number
Email address	Email address
Additional comments	
Completed form must be physically or electronically signed and dated	
Signed	Date

Data on all SG UK staff is held on computer. The Company aims to fulfil its obligations under the Data Protection Act 1998