**NEW EMPLOYEE REGISTRATION FORM FOR PAYROLL SERVICE**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employer's Name** | | | | | |  | | | | | | | | | | | | | | | | |
| **Employer’s Address** | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| **Employee Details** | | | | | | | | | | | | | | | | | | | | | | |
| **Full Name (inc Title Mr, Ms etc)** | | | | | |  | | | | | | | | | | | | | | | | |
| **Address** | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | **Postcode** | | |  | | | | |
| **Tel No.** |  | | | | | | | | | **Mobile** | | | | |  | | | | | | | |
| **Email Address** | | | | | | | | |  | | | | | | | | | | | | | |
| **Right to work in the UK?** | | | | | | Y/N | **Evidence e.g. Passport No. P60 (keep copy)** | | | | | | | | |  | | | | | | |
| **NI No:** |  | | | | | | **Date of birth** | | | | | | | |  | | | | | | | |
| **Emergency Contact (Name)**  **Relationship?** | | | |  | | | | | | | | | | | **Tel No** | |  | | | | | |
| **Driving Licence Number** | | | |  | | | | | | | | | | | | | | | | | | |
| **Employee’s Bank Account Details** (for paying wages) | | | | | | | | | | | | | | | | | | | | | | |
| Name of Bank (e.g. Halifax) | | | | | |  | | | | | | | | | | | | | | | | |
| Name of Account Holder | | | | | |  | | | | | | | | | | | | | | | | |
| Sort Code |  | | | | | | | | | Account No. | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| **Employee Signature** | | |  | | | | | | | | | | | | | | | | | | | |
| **To be completed by Employer** | | | | | | | | | | | | | | | | | | | | | | |
| Hourly Rate | £14.00 | | | | | Sleepover Rate | | | | | £9.50 | | | | Mileage Rate | | | 0.45 /mile | | | | |
| Sharing Mandate Completed | | | | | | | | | | Y/N | | | | Starter Checklist Completed? | | | | | | | | Y/N |
| PVG Membership No. | | | | |  | | | | | | | | | | | | | | | | | |
| Contracted Hrs? | | |  | | | | | | | | | | Variable Hours? | | | | | |  | | | |
| Shift Pattern (if known) | | | | | | Mon | | Tue | | | | Wed | | Thu | | | Fri | | | Sat | Sun | |
| Start Date | |  | | | | | | | | | | | | | | | | | | | | |
| **Signed** |  | | | | | | | | | | | | | | **Date** | | |  | | | | |