

EMPLOYER: \_\_\_\_\_

# NEW EMPLOYEE STARTER FORM

## COMPLETION INSTRUCTIONS:

- Complete this form using BLOCK CAPITAL and return it with form P45 to:
  - **Serco Chartered Accountants and Tax Advisers** at 133 Nork Way, Banstead, Surrey SM7 1HR; or
  - By either email at [gr@serco-accountants.co.uk](mailto:gr@serco-accountants.co.uk) or fax on 01737 358191
- If P45 is not available, please ask the employee to complete P46 instead, which can be downloaded from our website [www.serco-accountants.co.uk](http://www.serco-accountants.co.uk)

## PERSONAL DETAILS:

Surname*	<input type="text"/>	Title (eg Mr)*	<input type="text"/>
Forename 1*	<input type="text"/>	Gender*	Male <input type="checkbox"/> Female <input type="checkbox"/>
Forename 2	<input type="text"/>	Married	<input type="checkbox"/>
Address*	<input type="text"/>	Date of birth*	DD/MM/YYYY <input type="text"/>
Post Code*	<input type="text"/>	NI Number*	<input type="text"/>
		Passport no*	<input type="text"/>

## EMPLOYMENT DETAILS:

Date started*	<input type="text"/>	Days worked	Mon/Tue/Wed/Thu/Fri/Sat/Sun
Job Title	<input type="text"/>	Pay date	<input type="text"/>
Department	<input type="text"/>	Pay frequency*	Wk <input type="checkbox"/> 2-Wk <input type="checkbox"/> 4-Wk <input type="checkbox"/> Mth <input type="checkbox"/>
Works Number	<input type="text"/>	Pay method	Bank <input type="checkbox"/> Cheque <input type="checkbox"/> Cash <input type="checkbox"/>
Director	<input type="checkbox"/> (Tick if applicable)	Bank name	<input type="text"/>
Hours Per Week*	<input type="text"/>	Sort code	<input type="text"/>
Pay Rate*	<input type="text"/> OR	Account name	<input type="text"/>
Min Wage	<input type="checkbox"/> (Tick if applicable)	Account number	<input type="text"/>

## EMPLOYER CHECKLIST\*:

1. Proof of ID: Photocopy of passport retained
2. Proof of address: photocopy of utility bills or equivalent retained
3. Legal status checked and relevant documents retained
4. P45 from previous employer enclosed; or
5. P46 completed by employee (if P45 is unavailable) enclosed

## ADDITIONAL INFORMATION:

\*required information.

Employer signature\*: \_\_\_\_\_

Date\*: \_\_\_\_\_