

Personal Information Capture Form

This information will be stored with your contract on your personnel file as per the General Data Protection Regulations. Please notify your Line Manager of any changes to this information so it may be kept up-to-date. Your payment information will be passed onto our accounts department for payroll purposes.

Personal Details	
Full Name (incl. name usually known by if different)	
Home Address (incl. Postcode)	
Home Telephone Number	
Mobile Telephone Number	
Personal Email Address	
Date of Birth	
National Insurance Number	
Passport Number (incl. copy, to be taken on 1 st day)	
Details of any medication, allergies or medical conditions that could impact you at work (emergency use only)	

Contractual Details	
Start Date	
Contracted Hours/Days per Week	
Salary	

Payment Information	
Bank Name	
Account Number	
Sort-Code	
Will you be able to provide an immediate copy of your P45?	Yes or No

	First Emergency Contact	Second Emergency Contact
Full Name		
Relationship to you		
Contact Number		