

PEER MENTOR EMPLOYEE REGISTRATION FORM

* = required information – must be completed

*Employer Name:			
*Employee Title: (Please circle)	Mr Mrs Miss Ms	*Employee Forename: (Given name)	
*Employee Middle Names (s): (Given name)		*Employee Surname: (Family name)	
*Contact No:		*Start Date:	
*D.O.B		First Pay Date:	
Ethnicity:	White British <input type="checkbox"/> White Irish <input type="checkbox"/> White Other <input type="checkbox"/> Asian/ Asian British Indian <input type="checkbox"/> Asian/ Asian British Other <input type="checkbox"/> Asian/ Asian British Pakistani <input type="checkbox"/> Black/ Black British African <input type="checkbox"/> Black/ Black British Caribbean <input type="checkbox"/>	Black/ Black British Other <input type="checkbox"/> Chinese <input type="checkbox"/> Mixed other <input type="checkbox"/> Mixed White and Asian <input type="checkbox"/> Mixed White and Black African <input type="checkbox"/> Mixed White and Black Caribbean <input type="checkbox"/> Asian/ Asian British Bangladeshi <input type="checkbox"/> Other <input type="checkbox"/> I do not wish to disclose this information <input type="checkbox"/>	
Perceived Disability/ Status:	Yes <input type="checkbox"/> No <input type="checkbox"/> I do not wish to disclose this information <input type="checkbox"/>		
*NI Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
*Employee Address: (including post code)			
*Employee Email:			
Passport Number: (Currently optional)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
	If you have reviewed the employee's passport, as part of checking that they have the right to work in the UK, you must include their passport number here.		

*Basic Hourly Rate:	£	Annual leave will be paid at this rate also
Bank Holiday Rate: (if included in funding)	£	If paying an enhancement for Bank or Public holidays please specify rate
Weekend Hourly Rate: (if included in funding)	£	If paying an enhanced rate for weekend hours please specify rate. Annual leave will be paid at this rate also
Overnight: (if included in funding)	£	If paying an enhanced rate for overnight please specify rate. Annual leave will be paid at this also
Other: (if included in funding) Training/Supervision: Meeting:	£ £	Please specify any mileage, or other applicable rates to your funding

Number of normal hours worked:	<p>Please indicate how many hours the employee will normally be expected to work within a week. If the hours vary from week to week, indicate what you think of as the employee's normal number of paid hours.</p> <p><input type="checkbox"/> A: Up to 15.99 hours</p> <p><input type="checkbox"/> B: 16 to 29.99 hours</p> <p><input type="checkbox"/> C: 30 hours or more</p> <p><input type="checkbox"/> D: Other</p>
Start Declaration:	<p><input type="checkbox"/> If P45 available then please tick and enclose with this form.</p> <p>If not, please complete below declaration: Employees must answer the below 'start declaration': Only one tick permitted</p> <p><input type="checkbox"/> A: This is my first job since last 6 April and I have not been receiving taxable Jobseeker's Allowance, Employment and Support Allowance, taxable Incapacity Benefit, State or Occupational Pension.</p> <p><input type="checkbox"/> B: This is now my only job but since last 6 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.</p> <p><input type="checkbox"/> C: As well as my new job, I have another job or receive a State or Occupational Pension.</p> <p>Student Loans: I have a Student Loan which is not fully repaid and I left a course of UK higher education before last 6 April and I received my first Student Loan instalment on or after 1 September 1998. Select 'No' if you are repaying your Student Loan direct to the Student Loans Company by agreed monthly payments.</p> <p> No <input type="checkbox"/> Yes <input type="checkbox"/></p>
*Employee Signature:	<p>_____ Date: _____</p>

I can confirm that the information given on this form is, to the best of my knowledge, true and complete.	
*Employer Signature:	Date:

Employee Bank Details Form
(Only required for Managed Account Employers)

Employer Name:	
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Form to be completed by the Employee

Employee Name: (as it appears on the Bank Account)	
Account Holders Name: (if different from the Employee Name)	

Bank or Building Society Name:	
Bank or Building Society Address:	
Bank Sort Code:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Bank Account Number: (must be 8 digits long)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Building Society Account Roll Number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

I can confirm that the information given on this form is, to the best of my knowledge, true and complete. Any inaccurate or incomplete information will result in delay in payment.	
Employee Signature:	Date:

Please return to:

dp@barriebookkeeping.co.uk

or

Suite 1, Airlie House
Pentland Park
Glenrothes
Fife
KY6 2AG