

GENERAL GOODS & PROVISIONS MERCHANTS

New Start Form

Store: _____

Personal Information

Title: _____

Forename: _____

Middle Names: _____

Surname: _____

Date of birth: _____

Male

Female

National Insurance Number: _____

(Format AB 123456 C)

Street Number _____ Street Name: _____

Town / City: _____

Post Code: _____

Telephone Number: _____

Marital Status: _____

Email: _____

Payslips will be uploaded to Sage online; you will receive an email from Sage on how to access your payslips. This will be sent on a Wednesday, usually a week after employment and you have 24 hours to create an account. Any issues, inform your manager straight away.

Bank Details:

Bank Name: _____

Account Name: _____

Account Number: _____

(8 Digits)

Sort Code: _____

(6 Digits)

Emergency Contact

Full name: _____ Relationship: _____

Address: _____

Post Code: _____

Contact Number: _____

Starting Declaration

Please select the relevant option from the list below.

I have a P45 from my previous employer since last April 6th.

Please send this digitally to accounts@generalmerchants.co.uk.

OR

If you do not have a P45 or have not received it yet.

Please tick one of the following 3 statements & send your P45 to accounts@generalmerchants.co.uk once received.

(A) This is my first job since 6th April and I have not been receiving taxable Jobseeker's Allowance or taxable incapacity benefits or a state or occupational pension.

(B) This is now my only job, but since last 6th April I have had another job, or have received taxable jobseekers allowance or incapacity benefit. I do not receive a state or occupational pension.

(C) I have another job or receive a state or occupational pension.

Student Loans

If you left a course of higher education before last 6th April and received your student load instalment on or after 1st September 1998 and you have not fully repaid your student loan.

Please tick this box

(if you are required to repay your student loan through your bank or building society account, DO NOT tick the box)

If you ticked the box, please indicate whether it's plan type **1, 2, 4 or 5**

Signature & Date

I can confirm that this information is correct

Signature: _____

Date: _____

MANAGER USE ONLY

Start Date: _____

**Store Manager /
Head Chef:**

Job Title: _____

Wage: _____ per hour

General Manager: