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Personnel questionnaire for permanent employees, trainees and short-term employees

Company/employer (stamp, if applicable)

Personal data

Surname (maiden name)	Given name
Street and house number (incl. additional information)	Post code, city
Date of birth (dd.mm.yyyy)	Gender　　　　　　　　　　　　　diverse ○ male　　　　　　　　　　　○ female
Insurance number (as per social security card)	Marital status
Place, country of birth	Severely disabled ○ yes　　　　　　　　　　　○ no
Nationality	
Bank account number (IBAN)	Sort code/bank name (BIC)

Social insurace

Health insurance	Parenthood/children (yes/no) (copy of child's birth certificate, if applicable)

Tax

Identification number:
In the abscence of information, tax class 6 will be applied from the 3rd month onwards.

Tax class/factor	Child tax allowance	Confession

Employment

Entry date
Job title/occupation

Highest level of education	Highest level of professional training
○　No school leaving certificate	○ No vocational training
○　Haupt-/Volksschulabschluss (completion of secondary education)	○ Officially recognised vocational training
○　School leaving certificate or equivalent	○ Master craftsman/technician/equivalent degree
○　Abitur/Fachabitur (equivalent of A-levels in UK)	○　Bachelor's degree
	○ Diploma/graduate degree/master's degree/state examination certificate
	○ PhD

Weekly/daily working hours ○ full time　　　　○ part time　　**Amount of hours:**		

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Terms of employment

○ The term of employment is fixed ○ The term of employment is fixed for a purpose	○ Written conclusion of a fixed-term employment contract ○ Fixed-term employment is planned for at least two months, with prospects of further employment
Employment contract fixed until (dd.mm.yyyy)	Employment contract concluded on (dd.mm.yyyy)

Compensation

Salary/wage	Hourly wage Valid from (mm/yyyy)

Information of taxable previous employment periods in the current calendar year

(these are time periods in which work was performed under presentation of the income tax card)

Period from (dd.mm.yyyy)	Period to (dd.mm.yyyy)	Type of employment	Number of employment days
Period from (dd.mm.yyyy)	Period to (dd.mm.yyyy)	Type of employment	Number of employment days

Declaration by the employee:

I affirm that the above information is true and correct. I undertake to inform my employer without delay of any

changes, in particular with regard to further employment (in respect of type, duration and remuneration).

O I object to my income statements (earned and additional) being forwarded electronically to the
   Bundesagentur für Arbeit (Federal Employment office)

Date (dd.mm.yyyy)   Employee signature   Date (dd.mm.yyyy)   Employer signature