Personnel questionnaire for workers with mini jobs or short-term employment (employee is to leave grey fields blank)

Company:



Employee name

Personnel number

Dieser Personalfragebogen dient zur Vorerfassung von Personaldaten für das DATEV-Lohnabrechnungsprogramm. Zur Wahrung der Aufbewahrungsfrist wird der ausgefüllte Personalfragebogen von dem Arbeitgeber / der lohnabrechnenden Stelle gespeichert.

Personal data

Surname, maiden name as applicable	Given name
Street and house number (incl. additional information)	Post code, city
Date of birth	Gender male diverse female undetermined
Insurance number (as per social security card)	
Place, country of birth – <i>only if without insurance number</i>	Severely disabled Yes No
Nationality	Employee number, pension fund – construction
Bank account number (IBAN) Cash payment	Sort code/bank ID (BIC)

Employment

Date employme	nt contract begins	First day	Place of employment		
Description of profession		Job performed			
Volkschule/Hauptschule secondary education)		•	Professional training		
Education	Abitur (equivalent of A levels in UK)				
	Technical school/	university		└ No	
	University degree				
Holiday entitlement (calendar year) Weekly/daily working hours		Employed in construction industry sin			
Cost centre Department number		Person group			

Status at beginning of employment

Employee	School pupil	University applicant
Employee on parental leave	Unqualified	Military/social service
Unemployed	Self-employed	Other:
Civil servant	Student	
Housewife/househusband	Social welfare recipient	

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Steuerkanzlei Neß

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Taxes – Information as per income tax card

Official Municipality/community key	Tax office number		Identification number	
Tax class/factor	Number of exemptions for children	Denomination	2% flat tax	Yes No

Social	insurance
000101	in our arroo

Health insurance	State	Private	Name of state/private insurer
Accident insurance risk	tariff		DEÜV-status
For workers with mir option for increasing pe payments (§ 5, para. 2 Security Code (SGB VI)	nsion insurance , no. 2 Social		-insurance option n-insurance option (waive pension-insurance exemption)

Compensation				
Description	Amount	Valid from	Hourly wage	Valid from
Description	Amount	Valid from	Hourly wage	Valid from

Capital-forming benefits (VWL) - only required if contract is at hand

Recipient	Amount	Employer share (monthly amount)
	Since	Contract number
Bank account number (IBAN)	Sort code/bank ID (BIC)	

Information on additional employment

(for short-term employees also already terminated jobs from this calendar year)

Time period	Employer	Type of work	Weekly hours
		 Mini job Non-mini job employment Short-term employment 	
		Mini job Non-mini job employment Short-term employment	

Electronical acceptance of certificates (Bea)

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

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Employment documents

Employment contract	At hand	Included
 Income tax card/number of days employed at previous employer(s) 	No. of days employed	Included
Social insurance ID	Presented	Copy included
Application for exemption from pension insurance	At hand	Included
Certificate of private health insurance	At hand	Included
Capital-forming benefits (VWL) contract	At hand	Included
School/university certificate	At hand	Included
Severely disabled ID	Presented	Copy included
Pension fund documents construction/painting	At hand	Included

Declaration by the employee:

I affirm that the above information is 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).

Date

Employee signature

Date

Employer signature

Date

For minor signature of legal guardian