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| **Dept. use only.** | | | |
| **Department** |  | **Division** |  |
| **Casual appt start date:** |  | **Casual appt end date:** |  |
| **Casual appt type:** | Casual Worker / Casual Teacher / Casual Examiner | | |
| **Administrators: Please ensure the Casual Worker completes a Staff Stater form. This form is available from the** [**Equality and Diversity website**](https://www.admin.ox.ac.uk/eop/inpractice/recruitment/recruitmentmonitoring/)**. It can also be generated from CoreHR (once the Casual Worker has been appointed).** | | | |

* We are required to report information including your legal sex **(\*see note)**, to Her Majesty’s Revenue & Customs (HMRC), the UK’s tax authority.

**All fields are mandatory unless otherwise indicated.**

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| **PERSONAL DETAILS -** Please do not include any punctuation marks or diacritics in the name or address as these are not accepted by HMRC and some are not compatible with the BACS payment system. | | | | |
| **Surname** |  | | | |
| **Forename(s)** |  | | | |
| **Middle name(s)** |  | | | |
| **Given/preferred name (known as)** |  | | | *This will be used in your email address* |
| **Initials** |  | | | *Forename and middle name/s only* |
| **Title (Dr, Ms etc.)** |  | | | |
| **Home address**  *(Please include Country if outside the UK)* |  | | | |
| **Postcode** |  | | | *Enter in the following format: AA11 1AA* |
| **Home phone number** |  | | | |
| **Mobile phone number** |  | | | |
| **Email address** |  | | | |
| **Legal sex (\*see note)** | Male / Female | **Date of birth** |  | |
| **National insurance no.** |  | | | |
| **If you have worked at the**  **University before please state**  **Department (s)/Unit(S)** |  | | | |

\*We recognise that people who have started a process of gender transition, or who are gender variant, may have a discrepancy between their gender role and their Legal Sex as recorded for tax purposes. If you have any concerns about answering this question or need any advice you can contact the Equality and Diversity team in confidence at [staffdisability@admin.ox.ac.uk](mailto:staffdisability@admin.ox.ac.uk).

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| **ALTERNATIVE PAYSLIP ADDRESS -** *(Payslips will be sent to the dept. If the payslip is to be sent to another address please enter below.)* | | |
| **Payslip address** |  | |
| **Postcode** |  | *Enter in the following format: AA11 11AA* |

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| **BANK DETAILS** | | | | | | | | | | | | | | | |
| **Bank/building society name** |  | | | | | | | | | | | | | | |
| **Sort code** |  |  |  |  |  |  | **Account Number** |  |  |  |  |  |  |  |  |
| **Building society personal ref** |  | | | | | | | *If applicable* | | | | | | | |

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| **NEXT OF KIN/EMERGENCY CONTACT** *(optional)* | | | | | |
| **Forename** |  | **Surname** |  | | |
| **Address** |  | | | | |
| **Postcode** |  | | | *Enter in the following format: AA11 11AA* |
| **Relationship** |  | **Next of kin phone no.** | |  | |
| **Additional emergency contact** |  | | | *If required* | |

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| **RIGHT TO WORK** *(Department use only)* | | | |
| **Permanent List A** | | | |
| **Permanent right to work type *(tick relevant type)*** | |  |  |  |  | | --- | --- | --- | --- | |  | Non-EEA - indefinite LTR/settlement |  | Non-EEA exempt from immigration control | |  | Non-EEA - UK naturalization/rt of abode |  | UK/EEA (except Croatian)/Swiss | | | |
| **RtW Docs Checked By** |  | **RtW Date Checked** |  |
| **Limited List B** | | | |
| **Limited right to work type *(tick relevant type)*** | |  |  |  |  | | --- | --- | --- | --- | |  | Tier 1 (Exceptional Talent) |  | EEA Family Permit | |  | Tier 1 (General) visa |  | EEA Family (Cert of Application) | |  | Tier 2 (General)/old style work visa |  | Spousal Visa | |  | Tier 4 (Student)/old style student visa |  | Purple Reg Cert (Croatian) Tier 2 | |  | Tier 4 Doctorate Extension Scheme |  | Purple Reg Cert (Croatian) Tier 5 | |  | Tier 5 (GAE/Temporary Worker) visa |  | Blue Reg Cert (Croatian) | |  | Tier 5 (Youth Mobility Scheme) visa |  | Yellow Student Cert (Croatian) | |  | Tier 5 (External (GTI) Intern Scheme) visa |  | UK Ancestry visa | |  | PBS/work permit Dependant/Partner visa |  | Application Reg Cert (Asylum seeker) | |  | Visa application/appeal outstanding |  |  | | | |
| **Visa Issue date** |  | **Visa Expiry Date** |  |
| **RtW Date Checked** |  | **RtW Docs Checked By** |  |
| **RtW Date Next Check** |  |  | |
| **Comments** |  | | |

**WORKER DECLARATION**

Please read and sign the following declaration:

* By signing below I am confirming that the details provided in this form are true and complete.
* I consent to the information given in this form being stored and processed in accordance with the GDPR and related UK data protection legislation.

Signature:…………………………………………………………………Date:………………………………

*[Please key name and date if completing electronically*

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| **Dept. use only.** | | | |
| **Employee no.** |  | **Appt ID.** |  |