THE DIOCESAN OF SODOR AND MAN PAYROLL INFORMATION

|  |  |
| --- | --- |
| Employing Organisation/Company Name |  |
| Title and Name (full name please) |  |
| Staff Position/Department |  |
| Date employment commenced at |  |
| Date of Birth |  |
| Marital Status |  |
| Next of Kin Details (Name and telephone number) |  |
| Address |  |
| Tax Reference Number |  |
| Tax Code |  |
| National Insurance Number |  |
| Name of Bank |  |
| Branch Address |  |
| Sort Code |  |
| Bank Account Number |  |

I hereby confirm that the above information is correct and authorise the disclosure of such information to the Manx Computer Bureau Ltd for payroll processing purposes and the retention of such information on record by

 …………………………………. for personnel purposes.

I will inform the …………………………… of any changes to the above details in writing as soon as it should occur.

Signed:……………………….. Date:…………………………..

**FOR OFFICE USE**

|  |
| --- |
| **ANN. SALARY:****HOURLY RATE:** |
| **HRS WORKED:** |