



orbital  
Umbrella

### PERSONAL DETAILS - Please complete in CAPITALS

First Name:	Surname:
Date of Birth:    /    /    Male <input type="checkbox"/> Female <input type="checkbox"/> Nationality:	
Job Title:	
National Insurance Number:	
Home Telephone Number:	
Mobile Number:	
Address:	
Town / City:	
County:	
Postcode:	

### BANK DETAILS - Please complete in CAPITALS

Name of Bank / Building Society:	Branch Location:
Sort Code: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>	Account Number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Roll Number (if applicable):	Name of Account Holder:

### AGENCY DETAILS

Agency Name:	Branch Location:
Contact Telephone Number:	Name of Consultant:
Agency Start Date:	
Length of Contract:	
Type of Assignment:	

### NEXT OF KIN DETAILS

Name:	Contact Number:
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### DECLARATION

I can confirm all the above details are correct and it is my responsibility to inform Orbital Umbrella to any changes in my personal details. I also confirm that I have read and understood the contract of employment and all related paperwork.

Signed:

Date:

# PLEASE READ CAREFULLY AND SIGN ALL SECTIONS

If you have any questions regarding the correct completion of this form please visit 'Application explained' section on our website or call us on 01226 733209

## PROFESSIONAL AND WORK RELATED QUALIFICATIONS

I agree to provide a copy of any professional or work related qualifications or certificates that relate to my job title or current assignment.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## HEALTH AND SAFETY HANDBOOK

I can confirm that I have read and understood the Health and Safety handbook provided by Orbital. I agree to be aware of all health and safety issues relating to my assignment and also to adhere to all site/workplace safety rules and regulations as standard.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## P45 OR COMPLETION OF P46 FORM

Please tick the appropriate box:

I have submitted a P45 from my previous employer

I have completed a P46 form

## ELIGIBILITY TO WORK IN THE UK DOCUMENTS

I confirm that I have provided ETW in the UK documents or copies of (e.g. Passport, National Identity card, drivers' license, HMRC documents, birth certificate etc.) as detailed on the list within the starter pack.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## DECLARATION

I confirm that all the information I have given is correct and I understand that it is my responsibility to inform Orbital of any changes in my personal or assignment details as soon as possible. I agree with the terms and conditions set out in my employment contract and all supporting documents, and I have kept a signed copy for my own records.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_