

Personnel questionnaire

for workers with mini jobs or short-term employment

(employee is to leave grey fields blank)



Company:

Employee name

Personnel number

Personal data:

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

Employment

| | | |
|--|--|---|
| Date employment contract begins | First day | Place of employment |
| Description of profession | | Job performed |
| Education <input type="checkbox"/> Volkshule/Hauptschule (completion of secondary education) <input type="checkbox"/> Abitur (equivalent of A levels in UK) <input type="checkbox"/> Technical school/university <input type="checkbox"/> University degree | Professional training <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Holiday entitlement (calendar year) | Weekly/daily working hours | Employed in construction industry since |
| Cost centre | Department number | Person group |

Status at beginning of employment

| | | |
|---|---|--|
| <input type="checkbox"/> Employee | <input type="checkbox"/> School pupil | <input type="checkbox"/> University applicant |
| <input type="checkbox"/> Employee on parental leave | <input type="checkbox"/> Unqualified | <input type="checkbox"/> Military/social service |
| <input type="checkbox"/> Unemployed | <input type="checkbox"/> Self-employed | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Civil servant | <input type="checkbox"/> Student | |
| <input type="checkbox"/> Housewife/househusband | <input type="checkbox"/> Social welfare recipient | |

Taxes – Information as per income tax card

| | | |
|-------------------------------------|-----------------------------------|--|
| Official Municipality/community key | Tax office number | Identification number |
| Tax class/factor | Number of exemptions for children | Confession |
| | | 2% flat tax <input type="checkbox"/> Yes <input type="checkbox"/> No |

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Social insurance

| | | | | |
|--|--------------------------------|--|-------------------------------|--|
| Health insurance | <input type="checkbox"/> State | <input type="checkbox"/> Private | Name of state/private insurer | |
| Accident insurance risk tariff | | | DEÜV-status | |
| For workers with mini jobs only: | | | | |
| option for increasing pension insurance payments (§ 5, para. 2, no. 2 Social Security Code (SGB VI)) | | <input type="checkbox"/> Refuse pension-insurance option | | |
| | | <input type="checkbox"/> Exercise pension-insurance option (waive pension-insurance exemption) | | |

Compensation

| 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 on previous jobs from the year before)

| Time period | Employer | Type of work | Weekly hours |
|-------------|----------|---|--------------|
| | | <input type="checkbox"/> Mini job <input type="checkbox"/> Non-mini job employment <input type="checkbox"/> Short-term employment | |
| | | <input type="checkbox"/> Mini job <input type="checkbox"/> Non-mini job employment <input type="checkbox"/> 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).

Employment documents

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

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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**