

Raphael Contracting Ltd and JMS Specialist Joinery Ltd.
New Starter Form – CIS & PAYE

Personal Details

Full Name:	PAUL DRINKWATER	Title:	MR
Home Address:	315 TACHBROOK ROAD	Home Tel No:	
	WHITWASH	Mobile No:	07900094074
	LEAMINGTON SPA	Date of Birth:	26/5/87
<Town>	CV31 3DE	<Post Code>	MARRIED
CSCS Card Reg. & Colour		UTR No:	
E-Mail Address:		NI No:	JR91 9591D

Work Details

Start Date:	14/8/23	Probation Period:	
PAYE / CIS:		Line Manager:	
Position/Trade:	Joiner	Permanent/Temp:	
Salary/Day Rate:		Full-Time/Part-Time:	

Bank Details

Bank Name:	NATIONWIDE	Name on the Account:	MR P C DRINKWATER
Branch Address:	79-81 THE PARADE	Account No:	33341773
	LEAMINGTON SPA	Sort Code:	07 08 06
<Town>	CV32 4BT	<Post Code>	

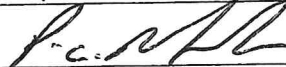
Next of Kin Details

Full Name:	NIAMH DRINKWATER	Relationship:	WIFE
Address:	315 TACHBROOK ROAD	Home Tel No:	
	WHITWASH LEAMINGTON SPA	Work Tel No:	07859 880873
<Town>	CV31 3DE	<Post Code>	
		E-mail Address:	

Additional Information Required

Qualifications Held:
 Any Training Requirements:
 Languages Spoken:
 Any Special Needs (Re Disability)

Please return this form and all other documents as advised by your foreman to Debbie Singh as soon as possible.
 (Raphael House, 123 Roebuck Rd, Chessington, Surrey KT9 1EU. debbie@raphaelltd.co.uk / 0208 391 9100.

Printed Name:	P. DRINKWATER
Signature:	
Date:	14/8/23

For Office Use - Document Checklist

Document		Description/Comments
Signed Contract	Yes	
P45	Yes	
Passport/Birth Certificate	Yes	
Qualification Certificates	Yes	
CSCS Card	Yes	
Liability Insurance	Yes	
Employee Number Issued	Yes	

Raphael Contracting Ltd. and JMS Specialist Joinery Ltd.

Induction Checklist Form

Employee Name:	P. DRINKWATER	Employee Position:	Joiner
Line Manager:		Department:	

It is the Company's policy to provide all new employees with a full induction course. This induction checklist is designed to ensure that all relevant information is covered. The line manager should tick each point to confirm this.

The form should then be signed by the new employee and returned to Steve Wright/John Gould at the end of the induction programme to confirm that the necessary information has been received and understood.

1. INTRODUCTION TO THE COMPANY (please tick when complete)

Introduce the new employee to his/her line manager	<input checked="" type="checkbox"/>
Introduce the new employee to the rest of the team	<input checked="" type="checkbox"/>
Explain purpose of new employee's role	<input checked="" type="checkbox"/>
Explain structure of department	<input checked="" type="checkbox"/>
Explain structure of company	<input checked="" type="checkbox"/>

2. HOUSEKEEPING (please tick when complete)

Where will the new employee sit?	<input checked="" type="checkbox"/>
Point out kitchen, washing facilities, toilets	<input checked="" type="checkbox"/>
Explain office security arrangements	<input checked="" type="checkbox"/>
Explain restrictions re: use of phone/mobiles/social media	<input checked="" type="checkbox"/>
What are arrangements re payment of salary? How/when will the employee be paid?	<input checked="" type="checkbox"/>
Has all new joiner documentation been provided/completed/signed?	<input checked="" type="checkbox"/>
Confirm holiday entitlement and process to follow when booking holiday	<input checked="" type="checkbox"/>
Explain dress standards	<input checked="" type="checkbox"/>
Confirm procedure to be followed in the event of sickness or other absence	<input checked="" type="checkbox"/>

3. HEALTH AND SAFETY (please tick when complete)

Procedure in the event of fire (alarms, fire exits, fire extinguishers)	<input checked="" type="checkbox"/>
Procedure in the event of an accident	<input checked="" type="checkbox"/>
Location of first aid box/accident book	<input checked="" type="checkbox"/>
Who are designated first aiders?	<input checked="" type="checkbox"/>

4. STAFF POLICIES

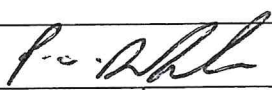
Has the new employee received the following Company Policies and have they been explained to him/her?

Grievance Procedure	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Disciplinary Policy and Procedure	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Harassment and Bullying Policy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Sickness & Absence Policy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Health & Safety Policy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Environmental Policy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Quality Policy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
IT and Internet Use Policy	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

I confirm the induction course has been completed:

Line Manager Name:	
Signature:	
Date:	

I confirm the induction course has been completed and that I have received and understood the information set out above:

Employee Name:	
Signature:	
Date:	14/8/23

When Induction Checklist Form is complete, please send it to the Office Manager

