

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

Personal Details

Full Name:	Robert Pender	Title:	Mr
Home Address:	5 De la War Drive,	Home Tel No:	
	OX16 4BF	Mobile No:	07830030013
<Town> Banbury	<Post Code>	Date of Birth:	21/04/1977
CSCS Card Reg. & Colour		Marital Status:	Single
E-Mail Address:	robertpender@live.co.uk	UTR No:	
		NI No:	JE 2842 05 B

Work Details

Start Date:	1/12/2021	Probation Period:	
PAYE / CIS:		Line Manager:	
Position/Trade:	Labourer	Permanent/Temp:	Permanent
Salary/Day Rate:		Full-Time/Part-Time:	Full-time

Bank Details

Bank Name:	Santander	Name on the Account:	Mr R.A. Pender
Branch Address:	7 High Street	Account No:	16777 347
	OX16 5DZ	Sort Code:	09-01-29
<Town> Banbury	<Post Code>		

Next of Kin Details

Full Name:	Karen May	Relationship:	Partner
Address:	Same as above	Home Tel No:	
		Work Tel No:	07507 234171
<Town>	<Post Code>	E-mail Address:	colesbuk@yahoo.com

Additional Information Required

Qualifications Held:

Any Training Requirements:

Languages Spoken: ~~English and English~~

Any Special Needs (Re Disability)

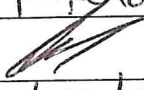
JMS SPECIALIST JOINERY LTD

- 7 DEC 2021

ACTION

COPIES

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:	R. Pender
Signature:	
Date:	1/12/2021

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:	Robert Pender	Employee Position:	Labourer
Line Manager:	Steve Wright	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"/>

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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

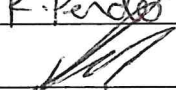
Has the new employee received the following Company Policies and have they been explained to him/her?

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:	R. Pender
Signature:	
Date:	1/12/2021

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

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DOCUMENT OWNER:	MOB			LAST REVISION DATE:	N/A	
				NEXT REVIEW DATE:	08/04/2014	