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| Dieser Personalfragebogen dient zur Vorerfassung von Personaldaten für das DATEV-Lohnabrechnungsprogramm. Zur Wahrung der Aufbewahrungsfrist wird der ausgefüllte Personalfragebogen von dem Arbeitgeber / der lohnabrechnenden Stelle gespeichert. | | | | | | | | |
| **Personal data** | | | |  | |  | | |
| Surname, maiden name as applicable | | | | Given name | | | |
| Street and house number (incl. additional information) | | | | Post code, city | | | |
| Date of birth | | | | Gender  male  female | | | diverse  undetermined |
| Insurance number (as per social security card) | | | |  | | | |
| Place, country of birth – *only if without insurance number* | | | | Severely disabled  yes   no | | | |
| Nationality | | | | Employee number, pension fund - construction | | | |
| Bank account number (IBAN) | | | | Sort code/bank ID (BIC) | | | |
| **Employment** | | | |  | |  | |
| Date employment contract begins | First day | | | Place of employment | | | |
| Description of profession | | | | Job performed | | | |
| Main employment / full time occupation  Secondary empooyment | | | | Probation:  Yes  No  Duration of probation: | | | |
| Do you have a second place of employment?  Yes No  Is this a so-called minor (geringfügig) employment with a maximum monthly income of 520,00 EUR / 6.240,00 EUR per annum?  Yes No | | | | | | | |
| Highest level of education  No school leaving certificate  Haupt-/Volksschulabschluss (completion of secondary education)  School leaving certificate or equivalent  Abitur/Fachabitur (equivalent of A levels in UK) | | | | Highest level of professional training  No vocational training  Officially recognised vocational training  Master craftsman/technican/equivalent degree  Bachelor’s degree  Diploma/graduate degree/master’s degree/state examination certificate  PhD | | | |
| Start of training / apprenticeship: | | Expected end of training / apprenticeship: | | | Employed in construction since: | | |
| Weekly work time:  Full timePart Time | | Where appropriate: Distribution of weekly work hours (hourly):  Mo Tu Wed Thu Fr Sa Su | | | Holiday entitlement (calender year): | | |
| Cost Center: | | Dept.-Number: | | | Person group key: | | |
| Form of contract: | | 1 – Unlimited Full-Time  2 – Unlimited Part-Time | | | 1 – Limited Full-Time  2 – Limited Part-Time | | |
| **Limitation** | |  | | |  | | |
| The work contract is limited /  Functionally limited /  Unlimited | | | | Limitation of employment contract until: | | | |
| Written conclusion of the limited contract | | | | Date of employment contract conclusion: | | | |
| Limited employment is intended for at least 2 months, with the prospect of continued employment | | | | | | | |
| **Taxes -** Information as per income tax card | | | | | | | |
| Tax identification number: | | | Tax class/factor: | | | | |
| Tax deduction for children (Kinderfreibeträge): | | | Religious denomination | | | | |

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| **Social insurance** | | | |
| National health insurance (if you are insured with a private health insurance: last national health insurance): | |  | |
| KV - national health insurance | | RV - pension insurance | |
| AV - unemployment insurance | | PV - long-term care insurance | |
| Accident insurance risk tariff | | DEUEV-status | |
| **Children for whom parenthood can be proven:** | | | |
| Surname | Given name | | Date of birth (DD.MM.YYYY) |
| Surname | Given name | | Date of birth (DD.MM.YYYY) |
| Surname | Given name | | Date of birth (DD.MM.YYYY) |
| Surname | Given name | | Date of birth (DD.MM.YYYY) |
| Surname | Given name | | Date of birth (DD.MM.YYYY) |

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| **Compensation** |  |  |
| Description Amount Valid for | Hourly wage Valid from | |
| Description Amount Valid for | Hourly wage Valid from | |
| Description Amount Valid for | Hourly wage Valid from | |

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| **Capital-forming benefits (VWL)** | |  |
| Recipient | Amount | Employer share (monthly amount) |
| Since | Contract number |
| Bank account number (IBAN) | Sort code/bank ID (BIC) | |

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| --- | --- | --- | --- |
| **Information of taxable previous employment periods in the current calendar year** (these are time periods of employment accounted for on the income tax card) | | | |
| Time period from | Time period to | Type of employment | Number of employment days |
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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).

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| --- | --- | --- |
| Date Employee signature |  | Date Employer signature |

|  |  |  |
| --- | --- | --- |
| Date For minor signature of legal  guardian |  |  |