

NZ Elgas New Employee Data Form

This form needs to be completed by all new employees

- New employees must complete all sections on this form. No pay will be processed until this form is received by Linde Employee Services

Personal Details (new employees must fully complete)

Preferred first name: _____ Last Name: _____

Full given names: _____ Previous surname(s): _____

Gender: Male Female

Date of Birth: _____ Nationality (on passport): _____

Country of Birth: _____

Home Address: _____

City: _____ Postcode: _____

Home Phone: _____ Mobile: _____

Email Address: _____

Are you of Maori or Pacific Islander origin?

(This data will be held confidentially and used for aggregated diversity statistics only)

Are you an Australian or New Zealand Citizen? Yes No

If No,

- Are you a permanent resident? Yes No

- Do you have a Working Visa? Yes* No

Visa Type: _____ Expiry date: _____

- o *If yes, please **attach a copy** of your passport and Visa Details/Letter from Immigration New Zealand

Emergency Contact Details

Emergency contact name: _____ Relationship to employee: _____

Emergency contact phones:

Work: _____ Home: _____ Mobile: _____

Banking Details

Please provide full and complete details of the bank account you want your pay to be deposited. Any bank, building society or credit union account in Australia is acceptable

- This form is for payroll use only (for confidentiality reasons). If you submit work related expenses to Accounts Payable for reimbursement, you must separately advise Accounts Payable of the bank account you require for that purpose.

Main Account

Bank Name: _____ Branch: _____

Account Name: _____

Bank Number: _____ Branch Number: _____ Account Number: _____ Suffix: _____

Secondary Account (optional)

Bank Name: _____ Branch: _____

Account Name: _____

Bank Number: _____ Branch Number: _____ Account Number: _____ Suffix: _____

Amount deposited to secondary account: _____

Employee's Signature: _____ Date: _____

Once Complete, email this completed form with attachments* (if required) to: newstarter@boc.com