PP Use	
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## **Self Directed Support Scheme New Starter Form**

Service User name										
Service User contact Tel number										
1. Details of person t	o be em	ploye	d:			1				
Surname						Title				
Forename(s)										
Address										
					Post Code					
Gender					Male / Female	Vlale / Female				
Date of Birth										
National Insurance N	lumber									
Employment Start Da	ate									
Tax Document Attached			P45	<b>✓</b>	P46	<b>✓</b>	P38 Student	<b>✓</b>		
2. Payment details: (please fill in the hourly rates)										
Description			Hourly rate							
Standard pay			£							
Other 1			£							
Other 2			£							
Other 3				<b>✓</b>	ı	<b>✓</b>		✓		
Pay Frequency			n/a		4-Weekly		Monthly			
3. Supplementary notes: (please record any notes in the box below)										
I authorise PayPartners to add the above person to my payroll and make payments to them in accordance with hours notified by me.										
Signed (Service Use	r)		110413 110		,					
Today's date	<u>'</u>									
<b>,</b>										

PayPartners Ltd, Lancastrian Office Centre, Talbot Road, Stretford, Manchester, M32 0FP