



Personal Details Form

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Employee number (office use only)

Surname	First name/middle names	Title (Mr/Mrs/Ms/Miss/Dr)
Date of birth	Country of birth	Citizenship
Deemed country of residence as stated in your contract		
Telephone number (Home)	Mobile number (Personal)	Mobile number (Work)
Email address (Personal)		
Home address (please note this must be a street address not a PO Box)		Residential address (please note this must be a street address not a PO Box)

Emergency contacts		
Principal		
Surname	Given name(s)	Relationship to you
Address		Telephone number (home)
		Telephone number (work)
		Telephone number (mobile)
Email address		
Secondary		
Surname	Given name(s)	Relationship to you
Address		Telephone number (home)
		Telephone number (work)
		Telephone number (mobile)
Email address		

Australian Residency (<u>ONLY</u> Australian citizens & Permanent residents to complete this section)		
Are you an Australian resident for tax purposes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you are NOT an Australian resident for tax purposes, would you like the 9.5% Superannuation contribution paid into a fund? OR Would you prefer 9.5% cash in lieu of Superannuation	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Your financial institution details																							
<p>PLEASE NOTE: Your bank account MUST accept US Dollar deposits as this is the currency your pay is transferred in. Payment is made by International Telegraphic Transfer. If you are using an Australian Credit Union, we have had significant difficulty transferring funds and it is advised that you setup an alternate bank account.</p>																							
Name of financial institution																							
Branch name and address (FULL STREET ADDRESS REQUIRED INCLUDING COUNTRY)																							
Account Holder's Name (The name in which the Account is held)																							
Account Number	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td> </tr> </table>																						
IBAN Number (mandatory for EU Bank Accounts)																							
SWIFT Code or BIC Code (mandatory)																							
BSB Number (for Australian and New Zealand Accounts)																							
Bank Branch/Routing Code																							
Which of your addresses (listed on page 1 of this form) is attached to your bank account details? Home <input type="checkbox"/> Residential <input type="checkbox"/>																							

Staff member's signature	Date
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It is important that this form is completed and returned to HR ASAP for Payroll implementation