



Personnel questionnaire

for workers with mini jobs or short-term employment

(employee is to leave grey fields blank)

Company:

Employee name

Personnel number

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 <input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> diverse <input type="checkbox"/> undetermined |
| Insurance number (as per social security card) | |
| Place, country of birth – <i>only if without insurance number</i> | Severely disabled <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Nationality | Employee number, pension fund – construction |
| Bank account number (IBAN) | |

Employment

| | | |
|---|----------------------|--|
| Entry date | First day | Place of employment |
| Description of profession | | Job performed |
| <p>Highest level of education</p> <input type="checkbox"/> Volksschule/Hauptschule (completion of secondary education) <input type="checkbox"/> No school leaving certificate <input type="checkbox"/> Abitur /Fachabitur (equivalent of A levels in UK) <input type="checkbox"/> School leaving certificate or equivalent <input type="checkbox"/> unknown | | <p>Highest level of professional training</p> <input type="checkbox"/> no vocational training <input type="checkbox"/> Officially recognised <input type="checkbox"/> vocational training <input type="checkbox"/> Master craftsman/technician/similar degree <input type="checkbox"/> Bachelor´s degree <input type="checkbox"/> Diploma/graduate degree/Master´s degree/state examination certificate <input type="checkbox"/> PhD <input type="checkbox"/> Unknown |
| Holiday entitlement (calendar year) | Weekly working hours | Employed in construction industry since |
| Cost centre | Department number | Person group |

Personnel questionnaire

for workers with mini jobs or short-term employment (employee is to leave grey fields blank)

| | | |
|---|-----------|----------|
| If applicable, distribution of weekly working hours | Monday | Tuesday |
| | Wednesday | Thursday |
| Friday | Saturday | Sunday |

Status at beginning of employment

| | | |
|---|---|--|
| <input type="checkbox"/> Employee | <input type="checkbox"/> School pupil | <input type="checkbox"/> University applicant |
| <input type="checkbox"/> Employee on parental leave | <input type="checkbox"/> Unqualified | <input type="checkbox"/> Military/social service |
| <input type="checkbox"/> Unemployed | <input type="checkbox"/> Self-employed | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Civil servant | <input type="checkbox"/> Student | |
| <input type="checkbox"/> Housewife/househusband | <input type="checkbox"/> Social welfare recipient | |

Temporary employment

| | | |
|---|---|-----------------------------------|
| Type of fixed-term contract | <input type="checkbox"/> Written conclusion of a fixed-term employment contract | Employment contract fixed until: |
| <input type="checkbox"/> Fixed term <input type="checkbox"/> Permanent <input type="checkbox"/> Fixed-term ending on completion of assignment | <input type="checkbox"/> Fixed term employment is planned for at least two months, with prospects of further employment | Employment contract concluded on: |

Personnel questionnaire

for workers with mini jobs or short-term employment

(employee is to leave grey fields blank)

Taxes – Information as per income tax card

| | | |
|-----------------------|---|---|
| Identification number | Blanket allowance <input type="checkbox"/> 2,00 % <input type="checkbox"/> 20,00 % | Identification number |
| Tax class/factor | Number of exemptions for children | Denomination |
| | | Burden shifted to employee <input type="checkbox"/> Yes <input type="checkbox"/> No |

Social insurance

| | |
|--|--|
| Health insurance <input type="checkbox"/> State <input type="checkbox"/> Private | Name of state/private insurer |
| Accident insurance risk tariff | DEÜV-status <input type="checkbox"/> 0 - no specification <input type="checkbox"/> 1 - spouse / cohabitant / descendant <input type="checkbox"/> 2 - managing partner (GmbH) |
| For workers with mini jobs only: Employees option for the exemption from the accumulation of pension insurance (acc. to § 6 sec. 1 b German Social Code VI) <input type="checkbox"/> Insurance exemption in the statutory pension insurance | |

Remuneration

| Description | Amount | Valid from | Hourly wage | Valid from |
|-------------|--------|------------|-------------|------------|
| | | | | |
| | | | | |

Capital-forming benefits (VWL) – only required if contract is at hand

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

Personnel questionnaire

for workers with mini jobs or short-term employment

(employee is to leave grey fields blank)

Do you exercise an additional employment? yes no

Information on additional employment

(for short-term employees also already terminated jobs from this calendar year)

| Time period | Employer | Type of work | Weekly hours |
|-------------|----------|---|--------------|
| | | <input type="checkbox"/> Mini job <input type="checkbox"/> Non-mini job employment <input type="checkbox"/> Short-term employment | |
| | | <input type="checkbox"/> Mini job <input type="checkbox"/> Non-mini job employment <input type="checkbox"/> Short-term employment | |

Electronical acceptance of certificates (Bea)

I object to my income statements (earned and additional) being forwarded electronically to the Bundesagentur für Arbeit (Federal Employment Office).

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).

Date

Employee signature

Date

Employer signature

Date

For minor signature of
legal guardian