

TEMPORARY WORKER'S PERSONAL DATA AMENDMENT FORM

WORKS NUMBER	NAME
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N.I. NUMBER	DATE OF BIRTH
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PLEASE INDICATE BELOW CHANGES TO YOUR DETAILS (AMENDMENTS ONLY)

NEW ADDRESS
POST CODE

TELEPHONE NUMBER

BANK ACCOUNT CHANGE
BANK NAME
ACCOUNT NAME
SORT CODE
ACCOUNT NUMBER

TEMPORARY WORKER SIGNATURE

CONSULTANT SIGNATURE

INPUT BY

CHECKED BY

TO BE PASSED TO THE PAYROLL DEPARTMENT NO LATER 10:00 AM

