

Declaration

I (full name), _____ declare that to the best of my knowledge that the answers in this form are correct and I understand that if any false or deliberately misleading information is given, or any material fact is suppressed, that my employment will be terminated. I understand that it is illegal to use someone else's identity or IRD number and in signing this I confirm that the above information belongs to me personally.

Signed: _____ Date: _____

Additional Information

Do you have any known conditions that may affect your ability to carry out the functions for this position? Yes / No

If yes, please provide details: _____

Do you have any allergies that we should be aware of? Yes / No

If yes, please provide details: _____

Are you at present receiving any medical treatment and/or taking medication? Yes / No

If yes, please provide details: _____

Do you consent to undergo a drug test, without delay, should it be required? Yes / No.

Do you have any criminal convictions? Yes / No

If yes, please provide details: _____

Employee Induction Check List

Induction carried out on: ____/____/____			
Health & Safety Procedures		First Aid Location	
Biosecurity Plan		Accident/Incident Reporting	
Job Dangers/Hazards		Washroom/Toilets	
Social Responsibility		Induction to Supervisor	
Complaints Procedure/Form		Induction to fellow workers	
Emergency Procedures		Drug and Alcohol Policy	
PSA Protocol		Hygiene Policy/Procedures	

Timesheet Process		Equipment Issued	
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In signing below, I acknowledge that I have given/received the above training and information required to undertake the job. For: Employer: _____ Employee: _____

Use this form if you're receiving salary or wages as an employee.

If you're a contractor or use a WT tax code, you'll need to use the *Tax rate notification for contractors - IR330C* form.

Once completed:

Employee Give this form to your employer.

If you receive a payment such as a benefit or superannuation, **return this form to Work and Income.**

Employer Do not send this form to Inland Revenue. You must keep this completed IR330 with your business records for seven years following the last wage payment you make to the employee.

When an employee gives you this form you must change their tax code, even if you have received different advice in the past.

1 Your details

First name/s (in full)

Family name

IRD number

(8 digit numbers start in the second box.)

2 Your tax code

You must complete a separate *Tax code declaration (IR330)* for each source of income

Choose only ONE tax code

Refer to the flowchart on pages 2 and 3 and then enter a tax code here.

If you're a **casual agricultural worker, shearer, shearing shed-hand, recognised seasonal worker, election day worker** or have a **tailored tax code** refer to "Other tax code options" at the bottom of page 3, choose your tax code and enter it in the tax code circle.

3 Declaration

Signature

Day Month Year

Give this completed form to your employer. If you don't complete Numbers 1, 2 and 3, your employer must deduct tax from your pay at the non-notified rate of 45 cents (plus earners' levy).

Privacy

Meeting your tax obligations means giving us accurate information so we can assess your liabilities or your entitlements under the Acts we administer. We may charge penalties if you don't.

We may also exchange information about you with:

- some government agencies
- another country, if we have an information supply agreement with them
- Statistics New Zealand (for statistical purposes only).

If you ask to see the personal information we hold about you, we'll show you and correct any errors, unless we have a lawful reason not to.

Contact us on 0800 377 774 for more information. For full details of our privacy policy go to ird.govt.nz/privacy