Instructions

Please complete all the relevant sections. In accordance with The General Data Protection Regulations (GDPR), Queen Mary take your privacy seriously and will only use your personal information to administer your Personnel Record and for data monitoring and reporting purposes. Where you provide an emergency contact please ensure that your contact is aware and consents to their information being passed and held by us.

You should complete this form when you start work with Queen Mary, and if you later need to update any of the information you are able to do so through MyHR (personal staff HR account). If you are starting work with us, please send/email the completed form to the HR Department along with your signed offer of employment/email confirmation of acceptance. We require all the information on this form to (a) set you up on our payroll system; (b) to complete our HESA return (which is a condition of funding); (c) to comply with tax regulations; and (d) for equality monitoring purposes. **If any required fields are missing for new starters, Queen Mary cannot pay you.**

| 1. Purpose of Form | | | |
| --- | --- | --- | --- |
|  | New appointment/making a claim for payment |  | I would like to amend/update my current details |

| 2. QMUL School/Institute & Centre/Department |
| --- |
|  |

| 3. Personal Details (complete all sections) | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Surname |  | | | | | | Title | |  |
| First Name(s) |  | | | | | | | | |
| Other Forenames |  | | | | | | | | |
| Known As |  | | | | | | | | |
| Former Name (if applicable) |  | | | | | Date of Birth (dd/mm/yyyy) | |  | |
| Legal Sex | Male |  | Female |  | Queen Mary collects data on legal sex for the purposes of statutory reporting to HM Revenue and Customs (HMRC) and Higher Education Statistics Agency (HESA). | | | | |

| 4. Your Contact Details (You must complete at least line 1 and 2 and the postcode) | | | | | |
| --- | --- | --- | --- | --- | --- |
| Home address | Line 1 | | | | |
|  | Line 2 | | | | |
|  | Line 3 | | | | |
|  | Line 4 | | | Postcode |  |
| Home phone |  | Mobile |  | | |

| 5. Emergency Contact  Where you provide an emergency contact please ensure that your contact is aware and consent’s to their information being passed and held by QMUL. | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  | | | Relationship | |  | | |
| Address |  | | | | | Post code | |  |
| Home phone |  | Mobile |  | | Work | |  | |

| 6. Rehabilitation of Offenders Act (1974) |
| --- |
| Many posts involving contact with patients/children are exempt from the Rehabilitation of Offenders Act (1974). You are therefore required to declare any convictions and pending prosecutions. Any information you supply will be treated as confidential and will not necessarily prejudice your application |
| I have **not** been convicted of any criminal offence, spent or otherwise.  I **have** been convicted of a criminal offence, spent or otherwise. Please give details below. |
|  |

| 7. Income Tax details (complete all sections) | | | | | |
| --- | --- | --- | --- | --- | --- |
| Have you had a P45? | | Yes  To be forwarded | National Insurance Number | |  |
| If you have one, you must bring your P45 with you to the HR Department on your first day of employment. If you do not do so, you **must** complete the following section. | | | | | |
| Please read the following three statements carefully and tick the **one** box that applies to you. | | | | | |
| A | This is my first job since last 6 April and **I have not** been receiving taxable Jobseeker’s Allowance or taxable Incapacity Benefit or a State or Occupational Pension. | | | | |
| B | This is now my only job, but since last 6 April **I have** had another job, or have received taxable Jobseeker’s Allowance or Incapacity Benefit. I do not receive a State or Occupational Pension. | | | | |
| C | I have another job or receive a State or Occupational Pension. | | | | |
| 7b. Veteran Status | | | | | |
| Are you a qualifying military veteran? | | | | Yes | No |

| 8. UK Student Loan - tick the appropriate box if you have an existing UK Student Loan and are not repaying directly through your bank or building society |
| --- |
| Plan 1 UK Student Loan  • You lived in Scotland or Northern Ireland when you started your course, or  • You lived in England or Wales and started your course before September 2012  Plan 1  Plan 2 UK Student Loan if you lived in England or Wales and started your course on or after 1 September 2012.  Plan 2 |

| 9. UK Post Graduate Loan - tick the appropriate box if you have an existing UK Post Graduate Loan and are not repaying directly through your bank or building society |
| --- |
| I have an existing UK Post Graduate Loan that is not being repaid directly through my bank |

| 10. Bank/Building Society details (complete all sections)  Please note: we are unable to pay into a non-UK bank account. | | | | |
| --- | --- | --- | --- | --- |
| Please enter below details of the account into which you wish your salary to be paid. | | | | |
| Name of UK Bank/Building Society | |  | | |
| Address |  | | | |
| Sort code |  | Account number (8 digits only ) | |  |
| Roll number (if needed by building society) | | |  | |

| 11. Pension details (complete all sections) | | | |
| --- | --- | --- | --- |
| **IMPORTANT** - You will automatically be entered into the relevant pension scheme.  **PLEASE NOTE IF YOU CHOOSE TO OPT OUT THE FORM MUST BE COMPLETED ON OR AFTER YOUR START DATE AND WITHIN 3 MONTHS TO BE ELIGIBLE FOR A REFUND OF YOUR CONTRIBUTIONS.**  An opt out form can be downloaded from the relevant links below:  Grades 1 -3: <http://www.saul.org.uk/1/1238>  Grades 4 and above: <https://www.uss.co.uk/members/members-home/resources/forms>  **Please email your completed form to**: [pension@qmul.ac.uk](mailto:pension@qmul.ac.uk) **or send to the HR Office, Mile End** | | | |
| Are you currently a member of any of the following pension schemes?  Do you wish to continue in that scheme? | NHS  Yes | USS  Yes | SAUL  Yes |

| 12. Equal opportunities (complete all sections)  Please note this section is for monitoring purposes and to assist Queen Mary in promoting equality and diversity. | | | | | |
| --- | --- | --- | --- | --- | --- |
| *We collect the below information relating to the protected characteristics under the*[*Equality Act 2010*](https://www.legislation.gov.uk/ukpga/2010/15/part/2/chapter/1)*, so that we can identify any inequalities in recruitment, promotion and other areas, assess the equality impact of our policies and practices to ensure they are equitable, fair and do not disproportionately affect different groups, and to inform the development of equality objectives and initiatives.*  *We understand this data is sensitive and personal and will always ensure we comply with the relevant GDPR and other legislation to keep your data safe and secure. The information you provide will only be used by staff undertaking equality related data analysis,  monitoring and reporting relating to the above purposes.*  ***Thank you for sharing your personal data with us, it will help us to continue to ensure we are an inclusive and fair employer, striving for equality of opportunity for everyone.*** ***Please mark with a tick the box(es) below which most closely describe you (codes are for use by HR).*** | | | | | |
| **Ethnic Background** | | | | | |
| White or White British | | | | | |
| British (11)  Other White background (19) | | | | | |
| **Black or Black British** | | | | | |
| Caribbean (21)  African (22)  Other Black background (29) | | | | | |
| Asian or Asian British | | | | | |
| Indian (31)  Pakistani (32)  Bangladeshi (33)  Chinese (34)  Other Asian Background (39) | | | | | |
| **Mixed** | | | | | |
| White and Black Caribbean (41)  White and Black African (42)  White and Asian (43)  Other Mixed background (49) | | | | | |
| Other | | | | | |
| Gypsy or Traveller (15) | | | | | |
| Arab (50) | | | | | |
| Other Ethnic background (80) | | | | | |
| Prefer not to say (98) | | | | | |
|  | | | | | |
| **Religion** | | | | | |
| No Religion (01) |  | Jewish (11) | |  | |
| Buddhist (02) |  | Muslim (12) | |  | |
| Christian (03) |  | Sikh (13) | |  | |
| Hindu (10) |  | Spiritual (14) | |  | |
| Other (80) |  | Prefer not to say (98) | |  | |
|  | | | | | |
| Nationality (please confirm nationality below) | | | | | |
|  | | | | | |
| **Gender Identity: which of the following best describes you?** | | | | | |
| *Gender identity refers to your innate sense of your gender, your internal sense of self, which may or may not align with your legally recognised sex. Queen Mary collects data on gender identity for all internal monitoring and reporting purposes. Examples include but are not limited to Gender Pay Gap, Athena Swan gender equality award, recruitment, career progression and Stonewall Workplace Equality Index.* | | | | | |
| Woman | | | Man | | Prefer not to say |
| Non-binary | | | Prefer to self-describe (or other): | | |
|  | | | | | |
| **Do you identify as trans?** | | | | | |
| *Trans is an umbrella term used to describe the diverse range of people whose****gender identity****does not align with the sex and gender they were assigned at birth (for example, a trans woman could be someone who is assigned male at birth but identifies and lives as a woman). This term may also be used by people who identify as non-binary.* | | | | | |
| Yes | | | No | | Prefer not to say |
|  | | | | | |
| **Which of the following pronouns do you prefer others to use when referring to you?** | | | | | |
| *A pronoun is a word used to refer to a person in place of their name. The most common third person identifying pronouns are she/her and he/him, but many people choose to use different gender-neutral pronouns such as they/them. (For example, ‘she updated her personal data on MyHR’). Queen Mary collects data on pronouns to ensure that all correspondence with staff refers to the individual’s correct pronoun.* | | | | | |
| He/Him | | | She/Her | | They/Them |
| Ze/Zir | | | Prefer to self-describe | | Prefer not to say |
|  | | |  | |  |
| **Sexual Orientation** | | | | | |
| *A person’s sexual attraction to other people, this can include having no sexual attraction/lack thereof.* | | | | | |
| Heterosexual/Straight | | | Bi | | Gay |
| Lesbian | | | Queer | | Asexual/ace |
| Prefer not to say | | | Prefer to self-describe: | | |
|  | | | | | |
| Disability  Under the Equality Act 2010, a person has a disability 'if they have a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities'. | | | | | |
| 1. Do you have a disability and/or consider yourself to be disabled? | | | | | |
| Yes | | | No (00) | | Prefer not to say (97) |
| 1. If answering ‘Yes’ in a), please specify the nature of any disability/disabilities below:   Specific learning difference and/or disability (such as dyslexia or dyspraxia) (51)  General learning difference and/or disability (such as Down's syndrome) (52)  Social/communication impairment and/or difference such as Asperger's syndrome/other autistic spectrum disorder) (53)  Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy) (54)  Mental health condition (such as depression, anxiety or schizophrenia) (55)  Physical impairment or mobility issues (such as difficulty using arms or using a wheelchair or crutches) (56)  Deaf or serious hearing impairment (57)  Blind or a serious visual impairment uncorrected by glasses (58)  A disability, impairment or medical condition that is not listed above (please specify in the box below): (96) | | | | | |
| If you require support and/or reasonable adjustments, please contact your line manager in the first instance. You can find more information [here](http://hr.qmul.ac.uk/equality/protected-characteristics/disability/reasonable-adjustments-/). | | | | | |
|  | | | | | |

| 1. **13. Previous Employment before QMUL** | |
| --- | --- |
| 1. Please tick the box which most closely describes your previous employment or occupation before entering employment with QMUL. Where a break in continuous service occurs and an individual has not been employed elsewhere during the break, code 21 'Not in regular employment' must be returned in this field. | |
| 1. Another Higher Education Institute in UK (01) 2. Higher Education Institute in an overseas country (including other EU countries) (02) 3. Other Education Institute in UK (03) 4. Other Education Institute in an overseas country (including other EU countries) (04) 5. Student in UK (07) 6. Student in an overseas country (including other EU countries) (08) 7. NHS/General medical or general dental practice in UK (09) 8. Health Service in an overseas country (including other EU countries) (10) 9. Other Public Sector in UK (11) 10. Private Industry/Commerce in UK (12) 11. Self-Employed in UK (13) 12. Other Employment in UK (14) 13. Other Employment in an overseas country (including other EU countries) (15)   Working in a research institute (private) in the UK (16)  Working in a research institute (private) in an overseas country (17)  Working in a research institute (public) in the UK (18)  Working in a research institute (public) in an overseas country (19)  Working in the voluntary sector (20)   1. Not in regular employment (21) | |
| 1. If your last employment was with a University within the UK or if you have at any time held such an appointment at a UK University please complete the section below. Give the most recent previous institution. | |
| 1. Name of UK University: |  |
| 1. If you have previously worked at another Higher Education Institute in the UK, please give details of your HESA Staff Identification Number (13 digit number – your previous institution will be able to provide this for you). | |
| 1. HESA Staff Identification Number |  |

| 14. Current Academic Discipline | |
| --- | --- |
| Please enter below details of your current academic discipline(s) | |
| Academic Discipline 1 |  |
| Academic Discipline 2 |  |

| 15. Highest Qualification Held to Date |
| --- |
| Please tick the box which most closely describes your highest qualification to date. In cases where it is unclear which qualification is the 'highest' enter the code that is closest to 01 'Doctorate'. |
| Doctorate (01)  Other Higher Degree (includes Masters) (02)  PGCE (03)  Other Postgraduate qualification (including professional) (09)  First Degree (11)  First Degree with Qualified Teacher Status (QTS) (12)  Other qualifications at first degree level (including professional) (19)  Diploma of Higher Education (21)  HND/HNC (22)  Other undergraduate qualification (including professional) (29)  A level, Scottish Higher or equivalent (NVQ/SVQ Level 3) (31)  O level/GCSE or equivalent (NVQ/SVQ Level 2) (32)  Other qualification (includes any overseas qualification that is not listed) (97)  No qualifications held (98) |

| 16. Academic Teaching Qualification |
| --- |
| Please tick the box which most closely describes your academic teaching qualification/teaching expertise |
| Successfully completed an institutional provision in teaching in the higher education sector accredited against the UK Professional Standards Framework (01)  Recognised by the HEA as an Associate Fellow (02)  Recognised by the HEA as a Fellow (03)  Recognised by the HEA as a Senior Fellow (04)  Recognised by the HEA as a Principal Fellow (05)  Holder of a National Teaching Fellowship Scheme Individual Award (06)  Holder of a PGCE in higher education, secondary education, further education, lifelong learning or any other equivalent UK qualification (07)  Accredited as a teacher of their subject by a professional UK body (08)  Other UK accreditation or qualification in teaching in the higher education sector (09)  Overseas accreditation or qualification for any level of teaching (10)  No academic teaching qualification held (99)  Please note any individual who holds any Teaching English as a Foreign Language qualification should tick the above box – ‘No academic teaching qualification held’ |

| 17. Current Clinical and Healthcare Specialty | | | | | |
| --- | --- | --- | --- | --- | --- |
| Please enter details below of your current Clinical Sub-Specialty and your Healthcare Professional Specialty. If you have more than one specialty please enter the additional details in the relevant box(es) below. | | | | | |
| Clinical Sub-Specialty 1 | |  | | | |
| Clinical Sub-Specialty 2 | |  | | | |
| Clinical Sub-Specialty 3 | |  | | | |
| Healthcare Professional Specialty 1 | |  | | | |
| Healthcare Professional Specialty 2 | |  | | | |
| Healthcare Professional Specialty 3 | |  | | | |
| 18. Professional Registration for Staff in Medical/Dental/Health and Social Care Professions | | | | |
| Please tick the appropriate boxes and give any further information required: | | | | |
| General Medical Council (GMC) Registered (01) | | | | |
| General Dental Council (GDC) Registered (02) | | | | |
| GMC/GDC Registration Number: |  | | Expiry Date: |  |
| National Training Number: |  | | | |
| Nursing and Midwifery Council (NMC) Registered (06) | | | | |
| NMC Registration Number: |  | | | |
| Health and Care Professions Council (HCPC): excluding social workers in England (07) | | | | |
| Health and Care Professions Council (HCPC): social workers in England (08) | | | | |
| HCPC Registration Number : |  | | | |
| General Optical Council (GOC) Registration (03)  Pharmaceutical Society of Northern Ireland (PSN) Registration (05)  Scottish Social Services Council (SSSC) Registration (09)  Care Council for Wales (CCW) Registration (10)  Northern Ireland Social Care Council (NISCC) Registration (11)  General Osteopathic Council (GOsC) Registration (12)  General Chiropractic Council (GCC) Registration (13)  Royal College of Veterinary Surgeons (RCVS) (14)  General Pharmaceutical Council (GPhC) (15) | | | | |

| 19. Consent to Process Sensitive Data | | | |
| --- | --- | --- | --- |
| QMUL is a [data controller](http://www.arcs.qmul.ac.uk/governance/information-governance/data-protection/dp-glossary/) in terms of Article 4 of the General Data Protection Regulation. We maintain information about you (your [personal data](http://www.arcs.qmul.ac.uk/governance/information-governance/data-protection/dp-glossary/)) in paper and electronic form, which is kept in Human Resources, faculties and departments for the administration of your employment and to comply with certain statutory obligations. QMUL wants to ensure that your personal data is accurate and up-to-date, therefore it is important that you inform us of any changes and update your information.  The full QMUL privacy notice can be accessed via the following link: <http://hr.qmul.ac.uk/workqm/privacynoticeforstaff/>,  The privacy notice explains how [Queen Mary University of London](http://www.qmul.ac.uk/contact/) collects, uses and shares personal data of its staff. Your personal data will be processed in accordance with our [Data Protection Policy](https://www.qmul.ac.uk/privacy/media/arcs/policyzone/Data-Protection-Policy-v03.0.pdf) | | | |
| 20. Declaration (please tick all of the boxes below) | | | |
| I confirm that all the information about me on this form is correct and I will inform HR of any changes.  If I have access to MyHR I understand that is expected that I keep my personal details up to date by using this self-service system. Queen Mary University of London (QMUL) will also from time-to-time send employees a copy of the details held on computer in order to keep this information up-to-date.  I understand that any misleading information or deliberate omissions will be regarded as grounds for withdrawal of any offer, or subsequently, for disciplinary action, which could lead to dismissal.  I confirm that I have read the terms and conditions relating to pension and its implications.  Further, I give my consent for QMUL to hold and use the special category data about me from section 12 of this form provided:   1. the information is used only for the purposes set out in section 19 of this form; and   QMUL complies with its obligations and duties under the General Data Protection Regulation (GDPR) | | | |
| Full Name |  | | |
| ***Please note you only need to sign this form if you intend to return it by post/provide us with a hard copy.*** | | | |
| Signature |  | Date |  |