



NOTES ON COMPLETING THE CASUAL CONTRACT FORM

PLEASE FILL IN AS MANY DETAILS AS POSSIBLE TO AVOID DELAYED PAYMENT

PERSONAL DETAILS	
Title: <input type="text" value="-- Selec"/>	Surname: <input type="text"/>
Forename(s) <input type="text"/>	Gender: Male <input checked="" type="radio"/> Female <input type="radio"/>
Address (Term-time): <input type="text"/>	
Postcode: <input type="text"/>	Student Matriculation Number (if applicable): <input type="text"/>
Date of Birth: <input type="text"/>	NI Number: <input type="text"/>
Telephone Number: <input type="text"/>	
Do you have any current contract with the University? <input type="checkbox"/>	
Staff ID Number: <input type="text" value="690"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (detailed on payslips as Payroll Ref)	

Student Matriculation Number: If you are a student, please enter your Matriculation Number here

Date of Birth: Please enter in format dd/mm/yyyy

National Insurance Number: Please enter your NI number in format AB 12 34 56 C if applicable

Any other contract: If you have another contract or have previously worked for the University, please enter your staff number – this can be found on your ID card or on payslips

BANK / BUILDING SOCIETY DETAILS	
Sort Code: <input type="text"/>	Account Number: <input type="text"/>
Roll Number (Building Society only): <input type="text"/>	
Bank / Building Society Address: <input type="text"/>	

A bank sort code and account number are mandatory. If you have a building society account with a roll number and no account number, please enter eight zeros in the account number.



YOUR PRESENT CIRCUMSTANCES	
<i>Read all the following statements carefully and tick the appropriate box</i>	
This is my first job since last 6 April and I have not been receiving taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity benefit or a state or occupational pension.	<input type="checkbox"/>
This is now my only job, but since last 6 April I have had another job, or have received taxable Jobseeker's Allowance, Employment and Support Allowance or Incapacity Benefit. I do not receive a state or occupational pension.	<input checked="" type="checkbox"/>
I have another job or receive a state or occupational pension.	<input type="checkbox"/>

Here you have to choose between **3 statements**. You **must** tick one of them or you have not filled in the contract correctly and the University may not operate the tax code most appropriate for you.

STUDENT LOANS	
If you left a course of Higher Education before last 6 April and received your first student loan installment on or after 1 st September 1998 and you have not fully repaid your Student Loan, please tick the following box. If you are required to repay your student loan through your bank or building society account, do not tick the box.	<input type="checkbox"/>

- Tick this box only if you are an ex-student who:
 - has a student loan which has **not been fully repaid** and the first payment received was on or after 1 September 1998 **AND**
 - finished or left your course of Higher Education **before the previous 6 April**.

The University of St Andrews is committed to promoting Equality of Opportunity and Diversity in all activities including recruitment and employment, and ensuring no direct or indirect discrimination occurs. The data you supply will be used for reporting and statistical purposes only and does not form part of any other process. The information is stored confidentially and is only accessible by Human Resources.

EQUAL OPPORTUNITIES (Optional)			
Marital Status:	-- Select --		
Nationality:		Ethnic Origin:	-- Select --
Religion:	-- Select --	Sexual Orientation:	-- Select --

This section is completely optional and is used for reporting and statistical purposes only



DISABILITY (Optional)
<i>The University is compliant with the Disability Discrimination Act 1995 (DDA) which protects disabled people. The DDA defines a person as disabled if they have a physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day to day activities.</i>
Do you consider yourself to have a disability? <input type="checkbox"/>
If yes, please indicate the type of impairment:
Please provide any additional information that you feel is relevant to your disability:

Again, this section is optional but allows the University to make reasonable adjustments to help overcome the practical effects of an individual's disability in accordance with the DDA. It also helps the University ensure that no disability discrimination takes place at any stage of the employment relationship.

SIGNATURE AND DATE
I understand that this is a short term casual contract which is due to end on the date specified in this document. I have no expectation of an extension or renewal of the contract beyond this date. I confirm that I have received, read and agree with the Terms and Conditions that apply to this contract.
Signature:
Date: 12/08/2010



When you have printed the form, please sign and return to the school/unit to be signed by the Head of School/Unit or Authorised Signatory.