

Staff tax registration and work permit form

Your data is needed to process your employment through our DATEV Payment Programm, for your work permit and our Sprachcamp record. This data will be used and saved by Sprachcamp Allgäu and our tax advisor – this information is strictly confidential and will not be passed on.

Surname	Name
Street and House Number	Postal Code and Town
Date of birth:	Gender <input type="checkbox"/> male <input checked="" type="checkbox"/> female
National insurance number	Passport: <input type="checkbox"/> UK <input type="checkbox"/> German <input type="checkbox"/> USA <input type="checkbox"/> Irish <input type="checkbox"/> Other:
Town/City and Country of birth	Family status: <input type="checkbox"/> Single <input type="checkbox"/> Married
Nationality	
IBAN (International Bank Account number)	Name of Bank

Employment with Sprachcamp Allgäu

Position <input type="checkbox"/> Language Assistant <input type="checkbox"/> Instructor	
Highest diploma <input type="checkbox"/> without <input type="checkbox"/> GCSE <input type="checkbox"/> A-levels <input type="checkbox"/> Other: _____	Job / Trade Diploma <input type="checkbox"/> none <input type="checkbox"/> a recognized trade <input type="checkbox"/> Technician /Master Craftsman or similar <input type="checkbox"/> Bachelor <input type="checkbox"/> Diploma / MA <input type="checkbox"/> PHD

Employment status at the start of working for Sprachcamp Allgäu

<input type="checkbox"/> Employee	<input type="checkbox"/> Registered Freelance instructor in the UK	<input type="checkbox"/> Pupil	<input type="checkbox"/> Student
<input type="checkbox"/> Unemployed		<input type="checkbox"/> Traveller with work and travel visa	<input type="checkbox"/> Applying for University
<input type="checkbox"/> Other:		<input type="checkbox"/> Traveller without visa	<input type="checkbox"/> in the army
I already worked or studied in Germany: <input type="checkbox"/> Yes / <input type="checkbox"/> No	Tax Category (if known)	Religion	
I already have a German tax ID: If you don't have one, you will receive a German tax ID once you are registered with us			

Social and other Insurances

Health Insurance <input type="checkbox"/> NHS <input type="checkbox"/> Private <input type="checkbox"/> Other:	Name of Health Insurance / Private Insurance/Insurance number:
Indemnity Insurance: (instructors only) <input type="checkbox"/> Yes <input type="checkbox"/> No	I have a health insurance for working abroad: (If you are NHS, you do) <input type="checkbox"/> Yes <input type="checkbox"/> No

Schoolcamp and Holidaycamp Dates 2022 (please tick the camps as confirmed)

May <input type="checkbox"/> 8. - 11.5.2023 <input type="checkbox"/> 15. - 18.5.2023 <input type="checkbox"/> 22. - 26.5.2023	July <input type="checkbox"/> 10. - 14.7.2023	Holiday camps <input type="checkbox"/> 10. – 16.4. 2023 <input type="checkbox"/> 30.7. – 5.8. 2023 <input type="checkbox"/> 6.8. – 12.8.	October <input type="checkbox"/> 9. - 12.10.2023 <input type="checkbox"/> 16.10. – 19.10.2023	April ▪ 17. - 20.4.2023
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Do you have other jobs? yes no

Please specify (this information is important in order to choose the right contract for you i.e., seasonal, permanent) Please list all your freelance work.

When?	Company / Employer	What kind of job	Weekly hours
Start date: end date:		<input type="checkbox"/> seasonal work <input type="checkbox"/> freelance work <input type="checkbox"/> fulltime employment	
Start date: end date:		<input type="checkbox"/> seasonal work <input type="checkbox"/> freelance work <input type="checkbox"/> fulltime employment	

Does this add up to more than 450 Euros? yes no


Tax confirmation can be electronically sent (Bea)

I do not agree that my data will be electronically processed by the German work agency

Relevant qualifications and certificates

<input type="checkbox"/> Current First Aid Certificate	<input type="checkbox"/> Confirmation of studies from your university
<input type="checkbox"/> RCI or SPA or similar:	<input type="checkbox"/> CELTA/TEFL or
<input type="checkbox"/> SPA or RCI in training	<input type="checkbox"/> Other teaching qualification:
<input type="checkbox"/> ML Summer	<input type="checkbox"/> Water/Canoeing qualifications:
<input type="checkbox"/> I am a Lifeguard:	<input type="checkbox"/> _____

Declaration of the employee: I confirm that the information above is correct. I agree that I will let my employer know about any changes, especially regarding other employment as it might affect your current employment status.

_____ _____ Rettenberg, 1.3.2023 
Date: Signature: Date Signature Employer