Personal details					P6000 must also be filled out			
Surname, First name					Date of birth			
Street, Number					Postal code, City			
Name and place of health insurance					Social security number			
☐ Own Membership ☐ Family insured ☐ Private			•					
Employed as			Start of employmen	t		Date of termination (if terminated)		
Charles at the atom of this annular mant								
Status at the start of this employment Student school class					Unemployed			
OMy studies are expected to end on				,				
Graduated with intention for vocational training								
_				0				
Student, studies expected to end on								
Employed only during the holidays?					Old age pensioner before reaching the statutory retirement age			
☐ Yes ☐ No				_	Old age pensioner after reaching the statutory retirement age			
Seeking Work / Training			_					
Federal voluntary service/Conscripts								
Other:				- · · · · · · · · · · · · · · · · · · ·				
					Self-employed			
Information about the registration as seeking employment Is the worker unemployed at the beginning of employment and registered with their local job centre as seeking employment?								
□ In the current calendar year I did not eversion any further short term ich:								
☐ In the current calendar year I did not exercise any further short-term jobs.								
In the current calendar year I have already exercised the following short-term jobs.								
from	to	Number	of working days	Em	nployer (voluntary)			
from	to	Number	of working days	Em	ployer (voluntary)			
Notes								
Note: A short-term – for the employee and employer social security free – employment exists within a calendar year when the employment is limited to three months or 70 working days, by their nature or limited in advance by contract and is not "professionally" exercised. Several short-term jobs in the current calendar year are summed up. I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I undertake to inform my employer about any changes, in particular the start of additional activities, without delay. For inaccurate or untruthful information any claims of compensation go at my expense.								
Place, D	Place, Date					Signature employee		
Employer								

Signature employer

Place, Date