

Personal details

employee ID <i>(optional – assigned by Paychex)</i>		Salutation and surname		First name	
<input type="checkbox"/> male	<input type="checkbox"/> single	Date of birth	Birth name		City and country of birth
<input type="checkbox"/> female	<input type="checkbox"/> married/partnership				
<input type="checkbox"/> non-binary	<input type="checkbox"/> divorced				
<input type="checkbox"/> indefinite	<input type="checkbox"/> _____				
Street name		Street number	Postal code	City	
Commencement of employment	Fixed-term employment until	Projected date of leave or retirement		<input type="checkbox"/> mercantile <input type="checkbox"/> commercial	
Occupational title	Business premises (city)	Business premises (federal state)		<input type="checkbox"/> Employee is spouse, registered life partner or descendant of the employer	
Weekly working hours	Entitled to (...) vacation days during first year of employment	Entitled to (...) vacation days during sophomore year of employment		<input type="checkbox"/> Employee is an executive shareholder of the LLC	
Name and residence of bank	IBAN			<input type="checkbox"/> Cash	Alternative account holder

Employment status (single choice)

<input type="checkbox"/> Regular employee (monthly income exceeds 2000.- €) If employee has additional jobs with wages above 538.- € please specify exact monthly income under "Notes".	<input type="checkbox"/> Apprentice End of apprenticeship contract:	<input type="checkbox"/> Non-mandatory pre-study industrial internship <input type="checkbox"/> Non-mandatory pre- or post-study industrial internship <input type="checkbox"/> interim internship (<i>attach valid matriculation certificate</i>)
<input type="checkbox"/> Minijob (up to 538.- € per month) In addition, fill in P6002	<input type="checkbox"/> Student Attach a valid matriculation certificate!	<input type="checkbox"/> Mandatory pre- or post-study industrial practical Enclose corresponding proof found within study regulations
<input type="checkbox"/> Low wage income (538.01 € – 2000.- € per month) In addition, fill in P6003	Short-term/seasonal employment (3 months or 70 working days per year) In addition, fill in P6004	<input type="checkbox"/> Mandatory interim study industrial practical Please enclose corresponding proof found within study regulations!

Income tax deduction properties (are necessary for new hires during the first payrun, afterwards retrieved electronically)

Employee's occupation is a:		In case of minijob		Professional association dues	
<input type="checkbox"/> Primary occupation <input type="checkbox"/> Additional occupation		<input type="checkbox"/> 2 % Tax paid by employer <input type="checkbox"/> 2 % Tax paid by employee		<input type="checkbox"/> Bremen <input type="checkbox"/> Saarland	
Tax-ID (11 digits)	Tax class	Employee's religious denomination		Spouse's religious denomination	
Children's allowance	Monthly tax free amount (€)	Monthly additional amount (€)		Coefficient	

Statutory accident insurance

Hazard class	<i>in case nothing is filled in, Paychex will use the main rate for increased risk area</i>
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Cost calculation (costs can be divided into up to 10 cost units. Please enter your desired segmentation under "Notes")

Cost calculation	Payer
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Company pension scheme (please enclose contract documents)

<input type="checkbox"/> Primary insurance <input type="checkbox"/> Pension fund <input type="checkbox"/> Relief fund <input type="checkbox"/> Contract regarding capital-forming investments (VL-Vertrag)	Total monthly Fee euro	Employer's contribution euro	Employee's contribution euro
First run:	Receiving financial institution	Contract number	
<input type="checkbox"/> Direct debit or standing order			
Name and location of bank	IBAN		

Social insurance data

<input type="checkbox"/> Statutory health insurance Name of insurance _____ (Enclose membership certificate of health insurance)	<input type="checkbox"/> Voluntarily insured with a compulsory health insurance fund (if gross earnings exceed 69,300.-€ annually or 5,775.- € monthly. Name and business premises of insurance _____ (Enclose membership certificate of health insurance) <input type="checkbox"/> The employer does not pay the total contribution to the health insurance	<input type="checkbox"/> Private medical insurance Monthly fee as specified by § 257 SGB V Total fee for health insurance _____ € Total fee for nursing insurance _____ € <u>Deductible amount from wage tax as specified by</u> § 10 Abs. 1 Nr. 3 EStG Deductible amount for health insurance _____ € Deductible amount for nursing insurance _____ € Please enclose certificates issued by private insurance. Please also enter employee's last health insurance as the pension- and unemployment insurance contributions must be paid accordingly.
Social Security Number (12 digits):		Nationality:
<input type="checkbox"/> Pension contributions will go to a specific professional benefits plan / pension scheme. The employee will transfer the total amount himself (Add a certificate of said benefits plan / pension scheme)		
Does the employee have children? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please fill in additional form P.6005. In order to avoid additional charges for childless individuals by the respective nursing insurance, please attach proof of parental status, e.g., proof of birth for <u>one</u> child. Said proof can be attached regardless of the child's age and remains valid for the entire duration of its life.		
Education <input type="checkbox"/> Without diploma (1) <input type="checkbox"/> Volks-/Hauptschule (2) <input type="checkbox"/> Mittlere Reife or equivalent (3) <input type="checkbox"/> Abitur/Fachabitur (4) <input type="checkbox"/> Unknown (5)	Graduation level/vocational education <input type="checkbox"/> Without vocational education (1) <input type="checkbox"/> Completed their vocational education (2) <input type="checkbox"/> Craftman's diploma or equivalent (3) <input type="checkbox"/> Bachelor (4) <input type="checkbox"/> Master's degree or equivalent (5) <input type="checkbox"/> PhD (6) <input type="checkbox"/> Unknown (7)	
Temporary work assignment (TWA) <input type="checkbox"/> No (1) <input type="checkbox"/> Yes (2)	Type of employment <input type="checkbox"/> Full-time, permanent (1) <input type="checkbox"/> Full-time, fixed-term employment (3) <input type="checkbox"/> Part-time, permanent (2) <input type="checkbox"/> Part-time, fixed-term employment (4)	
Employed retiree		Type of pension:
<input type="checkbox"/> Employee with severe disability (Add a copy of respective employee's severe disability certificate)		
<input type="checkbox"/> Wages in the construction industry ZVK - employee number: _____ (Add a holiday certificate from previous employer)		

Salary (please remember the statutory minimum wage of 12.41 € or the specific minimum wage for your industry)

Salary	Hourly wage	Additional pay	Is the annual income higher than 69,300.- €?
euro	euro	euro	<input type="checkbox"/> Yes <input type="checkbox"/> No
Apprentice 1st year	Apprentice 2nd year	Apprentice 3rd year	Apprentice 4th year
euro	euro	euro	euro
Passage money (private car)	Distance between residence and workplace (one way)		Taxation of passage money:
euro	kilometers		<input type="checkbox"/> By employer (taxed with 15%) <input type="checkbox"/> By employee via tax card
Company car gross list price	Distance between residence and workplace (one way)		Employee's contribution per month
euro	kilometers		euro

Notes

Note: Immediate reports must be requested from Paychex with a separate form.

_____ Place, date

_____ Employer's signature