

Part 6 - Earnings (continued)

NOTE Please provide proof for you and your partner's income: last 2 monthly, 3 fortnightly or 5 weekly payslips. If all necessary payslips are not available, please get your employer to complete the Certificate of Earned Income at the back of this form.

	You	Your Partner
Do you or your partner pay into a personal pension scheme? If 'Yes', we will need to see proof.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you getting Statutory Sick Pay (SSP) from your employer?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you getting Statutory Maternity Pay (SMP) from your employer?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you or your partner own part of a company that you work for? If 'Yes', we will need to see the partnership agreement and split in income.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you or your partner do any other work? eg are you a company director, company secretary, voluntary worker or any other second job, even if it is not paid work.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes:		
What other work do you do?	<div style="border: 1px solid black; height: 60px;"></div>	<div style="border: 1px solid black; height: 60px;"></div>
What is the name and address of the person you do this work for?	<div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div>	<div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div> <div style="border: 1px solid black; height: 40px;"></div>
When did you start this work?	<div style="border: 1px solid black; padding: 2px;">/ /</div>	<div style="border: 1px solid black; padding: 2px;">/ /</div>
How many hours a week do you usually work?	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
Do you get paid? If you only get expenses or tips, still tick 'Yes' and give details.	No <input type="checkbox"/> Yes <input type="checkbox"/> How much do you get before any deductions?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much do they get before any deductions?
	£ <div style="border: 1px solid black; width: 100px; height: 20px;"></div>	£ <div style="border: 1px solid black; width: 100px; height: 20px;"></div>
	How often? <div style="border: 1px solid black; padding: 2px;">Every</div>	How often? <div style="border: 1px solid black; padding: 2px;">Every</div>

Please send us your last 2 monthly, 3 fortnightly or 3 weekly pay slips.

If you have any additional jobs please continue on a separate sheet of paper.