

Change of Details Form

Under the Data Protection Act 1998, WEC Group Limited has an obligation to ensure that the information held about its employees is accurate and kept up-to-date. You are therefore required to inform your line manager and HR (Gemma Kennedy) of any changes as soon as is reasonably practicable, so that the Company's records can be updated.

Please complete all of **Section A** and then the information that is applicable to the change.

SECTION A- Your Details:

Title	
First Names	
Surname	
Date of Birth	
National Insurance Number	
Address	
Home Telephone	
Mobile Telephone	
Personal Email	

SECTION B

Emergency Contact:

Title	
First Names	
Surname	
Relation	
Home Telephone	
Mobile Telephone	

Address	
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New Bank Details:

Bank Name	
Address	
Sort-code	
Account Number	

Old Bank Details (this is to enable verification of your request)

Bank Name	
Address	
Sort-code	
Account Number	

Doctors Details:

Doctors Name	
Practice	
Address	
Telephone	

Changes to your medical history, including any medications which could affect your work or be a health and safety risk:

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Changes to any other details, or the correction of inaccurate personal information held on file by the company:

Changes to your driving licence, including convictions/disqualification:

I confirm that the information I have given on this form is, to the best of my knowledge, true and accurate. I hereby give my consent to WEC Group Limited processing the data supplied on this form.

Name	
Date	
Signature	

ONCE COMPLETED PLEASE PASS TO HR