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| FOR OFFICE USE ONLY: |
| W/F to ref: |
| File only ref: |

SCHOOL LEAVERS

(PLEASE COMPLETE IN BLOCK CAPITALS)

| | | | | | | | | | | | | |
|--|--|----------|---|---|---|---|---|---|--|--|--|--|
| 1. Title (Mr/Mrs/Miss/Ms/Other): | Forename(s): | Surname: | | | | | | | | | | |
| 2. Date of birth: | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table> | | D | D | M | M | Y | Y | | | | |
| D | D | M | M | Y | Y | | | | | | | |
| 3. Address: | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Post Code: | | | | | | | | | | | | |
| Contact telephone number: | | | | | | | | | | | | |
| Email address: | | | | | | | | | | | | |
| 4. Name and address of employer: | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 5. Date commenced full-time employment: | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table> | | D | D | M | M | Y | Y | | | | |
| D | D | M | M | Y | Y | | | | | | | |
| If you are self-employed, please tick here and complete Form 366 (Commencing self-employment) <input type="checkbox"/> | | | | | | | | | | | | |
| 6. Weekly / monthly income: | £ | | | | | | | | | | | |
| 7. If you receive income from any of the following, please tick here and list the sources and amount(s) to be received in the current year if the total from each is greater than £100: <input type="checkbox"/> | | | | | | | | | | | | |
| Bank interest, National Savings, building society | | | | | | | | | | | | |
| deposits, dividends, Government Securities, | | | | | | | | | | | | |
| property rental, deed of covenant, or any other | | | | | | | | | | | | |
| source not covered by Guernsey ETI deductions. | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 8. Guernsey Social Security number: | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> | | | | | | | | | | | |
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IMPORTANT: Please read the notes overleaf before you sign this form.

Your Signature: **Date:**

Data Protection statement: The information provided in this form will be processed in accordance with the Data Protection legislation and used to determine your liability until the receipt of your income tax return, for tax compliance, to ensure that details held are accurate and up to date, and may also be used for the purposes of the Rolling Electronic Census. Full details of our Data Protection Policy can be found at www.gov.gg/tax.

If you have commenced full-time employment, you will be issued with a Coding Notice once this form has been processed. Please ensure you notify this office if you change employer or have a change in your circumstances (i.e. you marry or commence paying a mortgage), as this will affect the allowances granted to you. Changes to your Coding can be requested online (www.gov.gg via “Do it online”) and further information on your Coding Notice is available at www.gov.gg/tax.

If your only source of income is from employment in Guernsey and your employer submits the details of your earnings to this office, you will be notified in writing that you will not be required to complete an income tax return on an annual basis. However, if you receive income that does not have tax deducted at source under the ETI Scheme, you will be required to submit an income tax return each year, even if your earnings are below the personal allowance.

Returns are available to complete online at <https://eforms.gov.gg/> or alternatively can be downloaded from www.gov.gg/tax under “Income tax returns”.

Returns should be submitted by 30 November following the end of the calendar year to which the return relates (i.e. the calendar year 2016 return should be submitted by 30 November 2017 to avoid a late filing penalty).

Please refer to www.gov.gg/tax for general information on the Guernsey tax system.

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|-----|---|--|--|
| (a) | Current / New / Resurrected O/T tax reference number: | | |
| (b) | Copy of O/T letter given to customer: | | |
| (c) | Employer’s tax reference number: | | |
| (d) | If issuing a Direction Notice, show your calculations (including any additional income in your calculations): | | |
| (e) | Coding Notice issued <input type="checkbox"/> | Direction Notice issued <input type="checkbox"/> | + Psuedo Code entered – if TP is in receipt of other income <input type="checkbox"/> |
| (f) | Form of Authority noted <input type="checkbox"/> | | |
| (g) | Social Security number entered on ITAX <input type="checkbox"/> | | |