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EMPLOYEE DATA FORM

- **Document Code:** HR-009
- **Version:** 1.0
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Purpose:

This form is used to **collect and maintain employee personal and professional details** for HR records, payroll processing, and compliance with company policies.

SECTION 1: EMPLOYEE BASIC DETAILS

Field	Details
Full Name	
Father's/Husband's Name	
Date of Birth (DD/MM/YYYY)	
CNIC/Passport No.	
Nationality	
Gender	☐ Male ☐ Female ☐ Other
Marital Status	☐ Single ☐ Married ☐ Widowed ☐ Divorced
Religion	
Blood Group	

SECTION 2: CONTACT INFORMATION

Field	Details
Present Address	
Permanent Address	
Mobile Number	
Alternative Contact Number	
Email ID	
Emergency Contact Name & Relationship	
Emergency Contact Number	

SECTION 3: EMPLOYMENT DETAILS

Field	Details
Employee Code (Assigned by HR)	
Date of Joining (DD/MM/YYYY)	
Designation	
Department	
Employment Type	☐ Permanent ☐ Contract ☐ Probationary ☐ Internship
Reporting Manager	
Work Location	
Basic Salary (PKR)	
Allowances (PKR)	

SECTION 4: ACADEMIC QUALIFICATIONS

Degree/Diploma	Institution	Year of Completion	Grade/CGPA

SECTION 5: PROFESSIONAL EXPERIENCE

Organization	Designation	Duration (From – To)	Reason for Leaving

SECTION 6: BANK DETAILS (FOR PAYROLL PURPOSES)

Field	Details
Bank Name	
Branch Name	
Account Title	
Account Number	
IBAN (if applicable)	

SECTION 7: DOCUMENTS SUBMITTED

Document Name	Submitted (☑ Yes / ✖ No)
CNIC Copy	☐ Yes ☐ No
Educational Certificates	☐ Yes ☐ No
Experience Certificates	☐ Yes ☐ No
Offer Letter Signed	☐ Yes ☐ No
Bank Account Details	☐ Yes ☐ No
Passport-Sized Photographs (2)	☐ Yes ☐ No

SECTION 8: DECLARATION & SIGNATURES

✅ I confirm that the information provided above is **true and accurate** to the best of my knowledge.
✅ I understand that **any false or misleading information may result in termination of employment**.

Employee Signature: _____ **Date:**

HR Representative Signature: _____ **Date:**

Note: This form must be **submitted within the first week of employment**.