

Certificate of Earnings



Any information you provide on this form will be processed in accordance with the requirements of the Data Protection Act 1998.

If you are working and cannot provide a pay slip, please have your employer complete this form.

Ref. No. _____

<p>Employee's Name: _____</p> <p>Address: _____</p> <p>Occupation: _____</p> <p>Payroll No: _____</p> <p>NINO : _____</p>	<p>Employer's Name (Official Stamp) and Address</p> <p>Employer's Signature: _____</p>
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If paid **WEEKLY**, the following information should relate to the previous **4 WEEKS** or, if paid **MONTHLY/4 WEEKLY**, the previous **4 MONTHS/16 WEEKS**.

	Date	Gross Earnings £ : p	Office Use Only
Week/Month/4Weeks Ending			
Week/Month/4Weeks Ending			
Week/Month/4Weeks Ending			
Week/Month/4Weeks Ending			