



Recruitment Grant - Claim Form

12 Week payment

This form can be used to claim the 12 week Recruitment Grant payment. This claim form can only be used when a Recruitment Grant application has been approved by Social Security.

Organisation	<input type="text"/>		
Employee	<input type="text"/>	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Employee's Social Insurance No.	<input type="text"/>	Start Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
Agreement Number:	RGA	<input type="text"/>	

Please detail whether the employee is likely to pass the probation period and continue employment, also outline any problems you have encountered, including any warnings that have been given to the employee.

We claim the 12 week recruitment grant payment for the above named employee who has now been employed at the above organisation for 12 full weeks and that the nature and agreements of the employment remain as disclosed on the Recruitment Grant application form.

Signed	Name	<input type="text"/>
	Date	<input type="text"/> / <input type="text"/> / <input type="text"/>

Bank and Account details *(if changed since 4 week claim form)*

Name of Bank	<input type="text"/>												
Account Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Sort Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Branch	<input type="text"/>												
Account Name	<input type="text"/>												

Data Protection Statement

The Committee for Employment and Social Security will process any personal data which you provide in accordance with the Data Protection (Bailiwick of Guernsey) Law, 2017. Further information about how your personal data is processed can be found at www.gov.gg/dp or alternatively you may call 01481 732500 and request a paper copy