New Employee Work Declaration Form

Personal Information
• Full Name:
Contact Number:
• Address:
• Job Title:
Date of Joining:
Work Availability
Are you available for full-time work?
[] Yes [] No
If no, specify hours of availability:
 Are you authorized to work in this country?
[] Yes [] No
Confidentiality Agreement
Do you agree to maintain confidentiality as outlined in the company policy?
[] Yes [] No
Work Equipment Needs
Do you require any specific equipment to perform your job?
[] Yes [] No
If yes, specify:
Doclaration

I affirm that the details provided are true and agree to comply with the company's work policies and regulations.

Signature Section

•	Employee Signature:	
•	Date:	