

Form for income tax deduction (withholding tax)

All personal changes must be communicated to the Personnel office. All adjustments communicated by the Cantonal Tax Office will be taken into account for your salary payment.

Please send the form to the Personnel office of Neuchâtel's University.

Personnal information

Name	<input type="text"/>	First name	<input type="text"/>
Street, no.	<input type="text"/>	ZIP	<input type="text"/> City <input type="text"/>
Type of residence permit *	<input type="text"/>	Expiry date of residence permit	<input type="text"/> *Enclose a copy of residence permit.
Civil status	<input type="text"/>	AVS n°	<input type="text"/>
Other employer :	<input type="radio"/> Yes <input type="radio"/> No	Confession	<input type="text"/>

Other employer (if yes, complete below)

Employer name	<input type="text"/>	Address	<input type="text"/>
Activity period	<input type="text"/>	Activity rate	<input type="text"/> Salary <input type="text"/>

Information about spouse or similar partnership

Name	<input type="text"/>	First name	<input type="text"/>
Home adress	<input type="text"/>		
Birth date	<input type="text"/>	AVS n°	<input type="text"/>
Type of residence permit *	<input type="text"/>		
* Enclose a copy of residence permit.			
Partner salary *	<input type="radio"/> Without income <input type="radio"/> with income (salary, unemployment or other)		

Employer (including address)*

Type of activity* Activity period *, since to
*** Supporting documents may be required.**

Information about child/children

Number of child(-ren) under 25 years of age, in education or schooling for which the employee support financially * : ***Supporting documents may be required.**

Residence In Switzerland, live with the employee In Switzerland, don't live with the employee
 Abroad

Signature of the employee

By signing, the employee confirms the accuracy of the above data.

Place and date

Signature _____