



NEXT OF KIN

CONFIDENTIAL

To be completed by employee. PLEASE USE CAPITAL LETTERS THROUGHOUT

Name:

Known as:

Mobile No:

Next Of Kin Details:

Name:

Relationship: **Please state e.g. Husband, Mother etc.**

.....

Home Phone Number:

Mobile No:

Address:

.....

Post Code:

GP Details:

Name:

Address:

.....

Number: