

Form E 2

Employment for one employer in several Member States

Type of communication	Reporting of new employee	Cancellation
Corresponding social security		
Employee Data		
Last name		
First name		
Country		
Postal code / City		
Address (Street, Number)		
Insurance number		
Date of birth		
Place of birth		
Sex	Male	Female
Nationality		
Phone Number		
E-Mail Address		
Employer Data		
Employer Name		
Start		
Planned end		
Expatriation / employment is fixed –term	Yes	No
Employee is employed at the employer since		
Job description – type of work		



Employee is part of a flight or cabine crew	Yes	No
Employee is working for employer in Austria as well	Yes	No
Employee is performing at least 25% of his work in Austria	Yes	No
State of work 1		
State of work 2		
State of work 3		
State of work 4		
State of work 5		

