

EMPLOYEE HISTORY AND LEAVE RECORD

To be completed and retained for each employee

EMPLOYER DETAILS

Registered Name _____ ABN/ACN _____
 Trading Name (if applicable) _____
 Class of Business _____
 Address _____
 Name of Transmittor(s) of Business _____

EMPLOYEE DETAILS

Name in Full _____
 Address _____ Postcode _____
 Date of Birth _____ Telephone No. _____ Mobile _____
 Date Employment Commenced _____ Tax File No. _____
 Employment Status: Ongoing Temporary Other (specify) _____
 Full Time Part Time Casual Other (specify) _____
 Ordinary Hours of Work (for Part-Time or Full-Time employee; eg 38 hours) _____ hours
 Agreed/Required Method of Pay (e.g. EFT) _____ Agreed/Required Pay Period (e.g. weekly) _____
 Agreed/Required Pay Day (e.g. Friday) _____ Dependent Spouse/Special Tax Offset Claimed: Yes No
 Tax Free Threshold Claimed: Yes No Family Tax Benefit Claimed: Yes No HELP Debt: Yes No
 Apprenticeship/Traineeship Details _____
 Applicable Award(s)/Agreements(s) _____
 Classification/Job Title under Award/Agreement _____
 Superannuation Fund Name _____ Membership No. _____
 Workers Compensation – Policy Name _____
 Policy No. _____
 Next of Kin _____
 Contact Details _____

TERMINATION OF EMPLOYMENT DETAILS

Date Notice of Termination Given _____ Date of Employee's Last Day at Work _____
 Method of Termination of Employment Consent Notice Summarily Other (specify) _____
 Reason(s) Given _____
 Terminated by (if by employer) _____ Position in the Business _____

SALARY PAYABLE AND DATE OF CHANGE

Date	Gross	Margin	Allowances		Tax	Deductions		Net Wage	Super Guarantee Contribution

SALARY PAYABLE AND DATE OF CHANGE

Leave Accrued			Leave Taken		Amount Paid		Leave Balance	Leave Accrued			Leave Taken		Amount Paid		Leave Balance
Date	Weeks	Additional Days	From	To	Amount	Date		Date	Weeks	Additional Days	From	To	Amount	Date	
Leave Balance upon Termination of Employment												Weeks			
Amount Paid upon Termination of Employment												\$			
Date of Payment															