

Employee Information

Personal Details

Title	Mr/Mrs/Ms	Gender	
Surname		Given Name	
Date of Birth		Tax File Number	
Home Address			
Mobile Phone		Home Phone	
Personal e-mail			
Emergency Contact Name			
Emergency Contact Number			

Banking Details 1

Bank			
Account Name			
BSB		Account Number	

Banking Details 2- Fixed amount or % of wage

Bank			
Branch Address			
Account Name			
BSB		Account Number	

Superannuation Fund - Industry

Fund Name		Spin	
Address		Membership Number	

Superannuation - Self Managed Superfund

Fund Name		ABN	
Electronic Servie Address			
SMSF Acc		SMSF BSB	

Pay Details

Annual Salary or \$ Hourly Rate		Usual weekly hours worked	
Allowances to be paid		Classification	
Employment Status	Full Time	Part Time	Casual
Date Employment Commenced	/ /20		
Employment Classification			

Tax Declaration

Tax File Number			
Tax Declaration	Australian Resident for Tax Purposes	Tax-free threshold	HELP/HECS debt

Please Circle Salary & Wages Closely Held Payee Working holiday maker

Declaration

I declare that the information I have given is complete and correct.

Signature:

Date:

Please note – there are Australian Taxation Office penalties for deliberately making a false or misleading statement.

Special Notes