Payroll

Employment Data Form



SECTION 1 – Employee Details					
Surname:	rirst Names:		Gender:		
Address:			Postcode:		
Postal Address:			Postcode:		
Commencement Date: Date of Birth:		Telephone No:			
Preferred email for Electronic Pay slip:					
Previous Local Government Employment (only if service is continuous)					
Name of Organisation:			Dates of Employment		
Name of Organisation:			Dates of Employment		
Payroll Deductions The option exists for staff to have deductions from their fortnightly payroll for a number of areas including Medical/Health Funds, Social Club, and Union Fees etc. Should you wish to organise a payroll deduction please see the Finance Officer – Payroll. SECTION 2 – Banking Information					
Account Name:	mation				
Bank: Branch:					
BSB: Account No:					
Note: Your pay can be distributed to more than one account. Please see the Payroll Officer if you wish to exercise this option.					
SECTION 3 – Next of Kin/Emergency Contact Details					
Next of Kin/Emergency – Contact Name:					
Contact Number/s:			Relationship:		
SECTION 4 – Completed Documentation Submitted					
·			er Forms		
,		Verit	fication of Right to Work in Australia		
Employee Signature:			Date:		
SECTION 5 – To be completed by Finance Officer - Payroll					
Payroll No:	Pay classifica	Pay classification Code:			
Nar. No	Position Code	Position Code:		Dept. Code:	
Confirm Bank Details	•	Superannuation Forms Comp		d Timesheet Created	
Employee Attribute	•	Add Emergency Contact		Leave Scale #	
Notification Preferences	Work Pattern	Work Pattern		Position	
Finance Officer Signature:			Date:		