

Employee or Contractor Details Form

First Name: _____ Last Name: _____

Start Date: ____ / ____ / ____

Position Title: _____

Gender: (circle one) M / F

Date of Birth: ____ / ____ / ____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Home Phone: _____ Mobile: _____

Email Address: _____

Employee Tax File No:

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Details for contractors:

Company Name: _____

Company Address: _____

Company Phone Number: _____ Company Email _____

ABN: _____ ACN: _____

Bank Details

Bank: _____

Account Name: _____

BSB:

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 Account Number:

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Are you an Australian citizen? Y / N

If no,

- Are you a permanent resident? Y / N
- Do you have a Working Visa? Expiry date: ____/____/____
- Any restrictions? _____

Next of Kin: _____

Relationship: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Home Phone: _____ Mobile: _____ Work: _____

Employee/Contractor's Signature: _____ Date: ____/____/____

Manager's Signature: _____ Date: ____/____/____

Office Use Only

Employee:

Status:

Full time
Part time
Casual

Pay rate:

Hourly Rates _____
Weekly _____
Bi-weekly _____
Monthly _____

Date of first pay review: ____/____/____

Contractor:

Base Hourly Rate: _____ Status: Contractor

Date of First Pay Review: _____