



EMPLOYMENT INCOME DETAILS

Privacy Notice

Tharawal Housing Aboriginal Corporation values the right and privacy of all clients. Tharawal Housing Aboriginal Corporation will not share your personal information unless required to by law or consent has been given. The information collected from you or a third party will be held by Tharawal Housing Aboriginal Corporation. Tharawal Housing Aboriginal Corporation complies with NSW privacy legislation when collecting and managing personal information. We may use your information within our organization when coordinating and planning ways to provide better service delivery. Information will only be disclosed to outside bodies when legal required to and in certain circumstance.

Employee Details

Title - Mr, Mrs, Ms, Miss

Last name or family name

Given name/s

Unit/House number

Street /Avenue

Town or Suburb

Postcode

Phone

Mobile

Email

Employment Details

Employer

Name or Person/Company

ABN

Business Address

Unit/House number

Street /Avenue

Town or Suburb

Postcode

Phone

Mobile

Email

Type of Employment

Full time

Part time

Casual

Employment Start Date

Employment end date (if applicable)

Period of employment during the past 26 weeks

Pay period start

Pay period end



EMPLOYMENT INCOME DETAILS

Income Details

Gross (before tax) salary/
wages as stated for the above period
(including Salary Sacrifices,
Allowances or Fringe Benefits)

Current gross (before tax) weekly wage
earnings of the employee

Amount of Salary Sacrifice per week

What is the Salary Sacrifice?

State the amount of any monetary
reimbursement for any travel expense incurred
by the employee during the past 26 weeks

Amount of Fringe Benefit per week

What is the Fringe Benefit?

Amount of Deductions per week

What is the Deduction?

Amount of Allowance per week

What is the Allowance?

Number of days lost without pay

I declare these details are correct.

Employer's representative name (please print)

Signature

Company stamp or seal

ABN

Date

Office Use Only

- | | | |
|---|------------------------------|-----------------------------|
| A photocopy of each document attached | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Each photocopy signed and dated by the tenant | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Confirmation sent to client | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Tenant's file updated | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Staff initials

DD / MM / YYYY