

155 Fullarton Road Rose Park SA 5067

Telephone 08 8332 6111
Facsimile 08 8333 4314
Toll Free 1800 182 124
ABN 26 476 100 527
hello@portableleave.org.au

Request to Investigate Unregistered Service

portableleave.org.au

This form may completed electronically or by hand

☐ Separation Certificate

Please read and complete this form carefully. We can only investigate if the work was performed in South Australia and your employment ended within the last five years. If you would like to investigate service with multiple employers, you will need to complete one form per employer. Your application will be returned unprocessed if the form is not completed in full or supporting documentation is not attached.

Personal Details	
Worker Registration	First Names Surname
Date of Birth/ Home Phone	Mobile
Postal Address	Post Code
Email Address	
Employer Details	
Business Name	
Mailing Address	Post Code
Business Telephone	Business Email
Contact Person who can verify your employr	ment (eg owner of business, payroll, supervisor)
Contact Position	Contact Telephone
Contact Email	
Employment Details	
Are you currently employed by this business	? □Yes □ No
Start date of employment//	End date of employment (if applicable)//
Has this employer registered any of your per	iod of employment? □Yes □ No
Start date of unregistered service/	/ End date of unregistered service/ (If applicable)
How were you employed? ☐ Full time ☐ P	art Time 🗆 Casual 🗆 Other (please describe)
Documentation	
In order for us to investigate, you must suppl	y supporting documentation. Please provide copies, as originals cannot be returned.
☑ Please tick the documents supplied	
Category A	
You must supply at least one of the below do assist in progressing your investigation.	ocuments for each financial year you were employed. Payslips are preferred and will
☐ Payslips (if possible the last payslip issued	l in each financial year)
	financial year) If you cannot locate your PAYG Payment Summaries (sometimes y be able to obtain these from the Australian Taxation Office.
$\hfill\square$ Tax Returns with income from the employ	er highlighted (one for each financial year)
$\ \square$ Bank Statements with the net payment from	om the employer highlighted (for the whole period of employment)
☐ Superannuation Statements with the cont	ributions from the employer highlighted (for the whole period of employment)
Category B Please supply as many of the below documer	nts as possible.
* * *	your employer detailing your classification/occupation or duties performed
☐ Employment Contract or Job Offer	, and a support a substitution of substitution
☐ Apprenticeship Training Contract	
☐ Timesheets/job sheets/work diary detailir	ng jobs and duties performed



155 Fullarton Road Rose Park SA 5067

Telephone 08 8332 6111
Facsimile 08 8333 4314
Toll Free 1800 182 124
ABN 26 476 100 527
hello@portableleave.org.au

portableleave.org.au

Request to Investigate Unregistered Service

This form may completed e	lectronically or by hand.	
Declaration of work performed		
What was your classification /occup	oation?	
	☐ On-site (industrial, commercial or residential)	☐ In a workshop ☐ In a factory
, . ,	☐ On-site and in a workshop ☐ On-site and in	
Please provide a detailed descript	ion of the construction work you did including th	,
	articular projects and note any changes to your v	
	ded is true and correct and I have attached all do	cumentation required for this request.
	Signature	