

A WHISTLE & Co Pty Ltd
Employee Information Sheet
LOCATION: _____

<p>New employee:</p> <p>I have completed and returned the following documentation to my Line Manager:</p> <ul style="list-style-type: none">Employment agreementEmployee information (this sheet)Tax File Number DeclarationChoice of superannuation formCopy of current drivers licenceCurrent driving history checkAuthority form re: criminal history checkMobile phone form (if company phone provided) <p>Signed: _____</p> <p>PLEASE NOTE: Employees must return all the above paperwork to their Line Managers before the employee can be entered into the payroll system</p>	<p>Line Managers:</p> <p>I have received the attached documentation from the employee whose details appear below:</p> <ul style="list-style-type: none">Employment agreementEmployee information (this sheet)Tax File Number DeclarationChoice of superannuation formCopy of current drivers licenceCurrent driving history checkCompleted criminal history check (note you also need to check 100 points identification as per procedure).Mobile phone form (if applicable) <p>Signed: _____</p> <p>PLEASE NOTE: This form must be completed in full and emailed to hr@edry.com.au before the employee can be entered into the payroll system. (Originals to be forwarded to Head Office).</p>
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NOTE: NO PAPERWORK, NO PAY

Employee details:	
Surname: _____	First name: _____
Address : _____	
Suburb: _____	State: _____ Post Code: _____
Date of birth _____	Sex: Male/Female
Home phone: _____	Mobile phone: _____
Email address: _____	
Uniform Requirements: Polo shirts (size): _____ Pants (size): _____	

Tax File Number: _____

Drivers Licence Number: _____ State: _____ Expiry: _____

Banking details	
Bank Name: _____	Account Name: _____
BSB: _____	Account Number: _____

Superannuation Details:	
Super Company: _____	
Account Name _____	
Member Number _____	

Emergency contact details: Name: _____ Phone: _____(h) _____(m) Email address: _____ Relationship to you: _____	Medical Conditions: Medicare Number: _____ Do you have any allergies or other medical problems which we should be aware of? Y/N Details: _____
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Line Manager to complete:	
Start date: _____	Employment status: Full-time / Part-time / Casual
Pay rate: Standard Other (please indicate rate): _____	Bonus level: 1 2 3
Pad washing to commence (date): _____	Uniform sizes confirmed with Head Office: Y / N
Company Mobile provided: Y / N	Company Mobile number: _____
100 points of identification received: Y / N (please ensure you have viewed the originals and taken copies).	