

SALARY CERTIFICATE

EMPLOYEE STATUS ENQUIRY

(Please complete in BLOCK CAPITALS)

Company / Organisation Name:

Address:

Telephone Number:

Company Registration Number:

Name of Employee Mr. / Mrs. / Ms. / Miss / Other:

Address:

Does employee have flexibility
to work remotely on an ongoing
basis as part of their current role: ☐ Yes
☐ No

Employee Start Date:

PPS Number:

Position held with Company:

Location of Employment:

Permanent: ☐ Yes ☐ No

Pensionable: ☐ Yes ☐ No

Full Time: ☐ Yes ☐ No

Part Time: ☐ Yes ☐ No

Temporary: ☐ Yes ☐ No

Fixed Contract: ☐ Yes ☐ No

Subject to Probationary Period: ☐ Yes ☐ No

Subject to Contract: ☐ Yes ☐ No

Probationary End:

Type of Contract: ☐ Rolling ☐ Indefinite Duration

Contract Start Date:

Contract End Date:

Pension
Scheme
in place: ☐ Yes ☐ No

Employee
Contribution
Mandatory: ☐ Yes ☐ No

If yes,
Employee
Contribution
per annum: ☐ Yes ☐ No

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(Please complete in BLOCK CAPITALS)

	Current Year	Previous Year	Two Years Ago	Three Years Ago	Guaranteed or Regular	
Annual Basic Salary:	€	€	€	€	☐	☐
Car Allowance:	€	€	€	€	☐	☐
Shift Allowance:	€	€	€	€	☐	☐
Overtime:	€	€	€	€	☐	☐
Bonus:	€	€	€	€	☐	☐
Commission:	€	€	€	€	☐	☐
Other Please Specify:	€	€	€	€		

Employee Subject to a Salary Scale: ☐ Yes ☐ No

What is the Maximum of the Scale: €

If YES, what is the next point up in the employee salary scale? €

As far as you are concerned,
will employee continue in
your employment: ☐ Yes
☐ No

Mandatory Retirement Age if Applicable:

Signature:

Please Authenticate with Company Seal / Stamp

Print Name:
(Owner, HR, Manager, etc.)

Position:

Authorised Signature for and on Behalf of:

Date:

We hereby advise you that your information will be processed, recorded and retained by us in electronic form.
The information given will be treated in the strictest confidence. We may contact you by phone to verify the details given.