

Section 1: Personal Details

Given Name(s):

Surname:

Date Of Birth:

Gender:

Male:

☐

Female:

☐

Insert Image

Employee Image

Employee Specimen Signature

Section 2: Employment Details

Employment
Start Date:

Staff/Payroll Number:

Annual Base
Gross Salary:

PGK

Hourly Pay Rate:

PGK

Method of Salary Disbursement: Bank(*then complete below*)

☐

Cash

☐

Salary Bank	Branch	Account Number	Account Name

Contributions
Start PPE:

Contributions Amount:

PGK

Employment
End Date:

Reason For Exit:

Contributions
End PPE:

Contributions Amount:

PGK

Occupation
Upon Exit:

Section 3: Employer Declaration

I, the authorised officer confirm that the information above is true & correct and no alterations were made or noted at the time of signing this form

Employer
Number:

Authorised
Officer's Name:

Designation:

Signature:

Dated:

Employer Stamp Here: