

Employee Status Enquiry

(Please complete in **BLOCK CAPITALS**)

Company / Organisation Name:

Company Address:

Telephone Number:

Company Registration Number:

Name of Employee (Mr. / Mrs. / Ms. / Miss):

Employee Address:

Does employee have flexibility to work remotely as part of their current role:

Yes No

Employment Start Date:

Month: Year:

PPS Number:

Position Held:

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

State Probationary / Contract Period End: DD / DD / YYYY

Type of Contract: Rolling Indefinite Duration

Pension Scheme in Place: Yes No

Employee Contribution Mandatory: Yes No

If Yes, Employee Contribution Per Annum: €

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

Is employee's income supported by Covid-19 wage support scheme:

Yes No

(if YES)

Scheme Name:

Monthly Value: €

Expected End Date of Support: DD / DD / YYYY

Employee Subject to a Salary Scale: Yes No

As far as you are concerned, will he/she continue in your employment: Yes No

If Yes, State Maximum of Scale: €

Signature:

Print Name:

Position: Owner, HR Manager, etc.

Authorised Signature
for and on behalf of:

Please Authenticate with Company Seal / Stamp

Date: DD / DD / YYYY