

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:				
Health/Dental Insurance (employer contribution)				
Overtime:				
Bonus:				
Commission:				

Date of next Salary Review: DD / DD / YYYY
If yes, what is the next point up in the salary scale? _____
Are these Salary Scales guaranteed? Yes No

Employee Subject to a Salary Scale: Yes

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.

Employer Contact Telephone Number: _____

Employer Contact Email Address: _____

Employer Contact Registered Number: _____

Authorised Signature
for and on behalf of: _____

Date: DD / DD / YYYY

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.