

Employment and earnings information for applications



MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

To:

.....
.....
.....
.....

Return the completed form to:

.....
.....
.....
.....

In this form we (the Ministry of Social Development or our Contracted Service Provider) ask for employment and earnings information about the person named below. They've given us permission to get this information from you so we can work out if they qualify for any help from us. We may share the information you give us on this form with them.

Please complete this form and send it back to us by

Day Month Year

Please contact me if you have any questions.

Thank you.

MSD staff member's name		
Phone number	()	Fax ()
Email		

Person's details

Client number

| |

First and middle names

Surname or family name

Date of birth

Day Month Year

Written permission

I give the Ministry of Social Development (or my Contracted Service Provider) permission to get my information from the employer named above.

Client's signature

Day Month Year

Verbal permission

The person named above has given verbal permission to the Ministry of Social Development (or our Contracted Service Provider) to get their information from the employer named above.

I have explained the information we're asking for in this form.

The person is able to confirm this.

Staff member's name

Day Month Year

Employer to complete

Tell us if the person is working for you

1

Is the person currently working for you?

If the person has stopped working temporarily (for example because they're sick) and you're not currently paying them, you should answer "No" for this question.

 No

[Go to question 2](#)

 Yes

[Go to question 5](#)

Details if the person no longer works for you

2

What was the last day the person worked for you?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

3

Why did the person stop working for you?

 They were made redundant/laid off 90 day employment trial has ended

[Please explain why below](#)

 Contract/seasonal work ended

[Please explain why below](#)

 Other

[Please explain why below](#)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

4

Did the person get any of the following payments from you when they left?

 No Yes

[Please tick the box and write in the amounts](#)

	Before tax	After tax
<input type="checkbox"/> Sick pay	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Holiday pay	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Termination pay	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Redundancy pay	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Other	\$ <input type="text"/>	\$ <input type="text"/>

[Go to question 8](#)

HOW TO ANSWER Q4:
Holiday pay includes long-service leave payments and **termination pay** includes payments in lieu of notice.

Details if the person still works for you

5

When did the person start working for you?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

HOW TO ANSWER Q6:

By full-time, we mean generally working at least 30 hours a week.

By part-time, we mean generally working at least 15 hours a week.

6

What type of work does this person do?

Full time
 Part time
 Casual
 Seasonal
 Self-employed
 Voluntary

HOW TO ANSWER Q7:

If their income varies week to week, provide an average (for example an average of their last four weeks' pay).

7

How much does the person usually earn each week?

Before tax	After tax
\$ <input type="text"/>	\$ <input type="text"/>

Breakdown of the person's income

8

What has the person been paid, in the last four weeks, or until the date they stopped working for you?

	Week ending	Before tax	After tax
1.	/ /	\$	\$
2.	/ /	\$	\$
3.	/ /	\$	\$
4.	/ /	\$	\$

HOW TO ANSWER Q8, Q9 AND Q10:

If your payment system can produce the information requested in questions 8, 9 and 10 you can attach a printout.

Please include any payments described in question 4 and/or bonus payments, gratuities, etc.

9

What was the total income you paid this person in the last 52 weeks, or until the date they stopped working for you?

Before tax	After tax
\$ <input type="text"/>	\$ <input type="text"/>

10

What was the total income you paid this person in the last 26 weeks, or until the date they stopped working for you?

Before tax	After tax
\$ <input type="text"/>	\$ <input type="text"/>

HOW TO ANSWER Q11:

Other types of payment include advantages such as free or subsidised goods and services (for example, free food, subsidised accommodation).

11

Did the person receive any other types of payment from you, apart from money, in the last 52 weeks?

No
 Yes
 ↓ Please tell us about the types of payment and their value

Type of payment	Value
<input type="text"/>	\$
<input type="text"/>	\$
<input type="text"/>	\$

12

What tax code did the person use for this job?

Signature

The information I have provided is a true and complete match of the records held in this office.

I have authority to provide information for this business/company.

Business/Company's name

Contact person's name

Contact person's details

Phone number	()
Email	

Employer's or delegated person's signature

Day

Month

Year

--	--	--