

Salary Certificate



Name of Employee: _____

Address of Employee: _____

[2] Exact location of employment: _____

[3] Staff work number: _____

[4] RSI number: _____

[5] Position held with company: _____

[6] Date of commencement of employment: _____

[7] Has the employee completed his/her probationary period: Yes No

[8] Is employment

- permanent _____
- pensionable _____
- temporary _____
- fixed contract _____

[9] Term of Contract (is the contract renewable, if renewable, please state terms):

[10] Gross Basic Wage/Salary: € _____ p.a Please state which of these is guaranteed
Overtime: € _____ p.a Overtime: _____
Bonus: € _____ p.a Bonus: _____
Commission: € _____ p.a Commission: _____

[11] Is the employee on a salary: Yes: No:

[12] If yes, what is the maximum of the scale: € _____

[13] As far as you are aware will he/she continue in your service: _____

On behalf of: _____
(I certify that the above information is accurate)

Signed: _____

Print Name: _____

Position: _____

Company Name: _____

Company Address: _____

Date: _____

Telephone No: _____ Fax No: _____

Registered Number: _____

PLEASE AUTHENTICATE
WITH
COMPANY STAMP/SEAL

