



Retirement Benefits Fund Board

GPO Box 446, Hobart Tas 7001

Telephone: 1800 622 631 or 03 6233 3672

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ADVICE OF EMPLOYEE APPOINTMENT

Employing Agency/Authority:

Reason for Form:

- New Appointment
 Change of Employment Status
 Change of Personal Details

Employee Details:

Full Name:

Marital Status: Title: Sex:

Postal Address:

Suburb: State: Postcode:

Email Address:

Phone Numbers:
(Home) (Business) (Mobile)

Date of Birth: Evidence of Birth Enclosed: YES/NO

Payroll ID No. Tax File No:

Employment Details:

Agency Code: Paycentre Code:

Date of Appointment:

- Employment Status: Permanent Full Time Permanent Part Time
 Temporary Full Time Temporary Part Time
 Contract Casual

If Contract employee:

Contract makes provision for alternative Superannuation arrangements **YES/NO**

Contract duration: From: To:

Employment Percentage (if less than full time): %

If a Change of Employment Status:

Previous Employment Status: %

Advice of Employee Appointment (continued)

If Existing Employee:

1. Did the employee commence TEMPORARY employment prior to PERMANENT appointment? YES/NO

If YES Date Commenced : _____

2. Did the employee **transfer** from another Agency / Employing Authority? YES/NO

If YES please give details:

3. Is the employee commencing an *Additional* position (eg to be employed in two positions) YES/NO

4. Is the employee commencing a new period of employment?
(eg recently completed TEMP period and commencing a new one) YES/NO

5. If existing employee please indicate RBF Identification Number: _____

6. Has the employee been seconded from another agency? YES/NO

Certifying Officer's

Signature: **Date:**

Name: (please print) _____ **Phone No:** _____

RBF OFFICE USE ONLY:

RBF Member Number: