



SALARY CERTIFICATE

NAME OF EMPLOYEE _____

Address of Employee _____

PPS Number _____

1 **Position held with Company** _____

2 **Date of commencement of Employment** _____

3 **Location/Address of Employment** _____

4 Has the Employee completed his/her probationary period Yes No

5 **Is Employment**

Permanent	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Pensionable	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Full time	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Part Time	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	No of Hours/Days _____
Temporary	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Expiry date _____
Fixed Contract	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Expiry date _____

6 **Annual Basic Salary** € Is this guaranteed

Bonus € Is this guaranteed

Overtime € Is this guaranteed

Commission € Is this guaranteed

7 Is employee on a salary scale Yes No

If yes, what is the maximum of scale € _____

8 **Company Name** _____

Address _____

Telephone number _____

Signature of authorised Official _____

I certify that the above information is correct

Position Held _____

Date _____

COMPANY STAMP

