

Employee Registration Application for Western Australia

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CONSTRUCTION
INDUSTRY
LONG SERVICE
LEAVE SCHEME

Personal Details (Please use block letters)

Last Name _____ First Names _____

Date of Birth ____ / ____ / ____ Male Female

Address _____

Suburb _____ State _____ Postcode _____

Phone/Mobile _____

Email _____

Your Employment Details

Current Occupation/Classification (eg. Labourer, Carpenter, Bricklayer etc.) _____

Are you an Apprentice Working Director Partner

Current Employer _____

Address of Employer _____

_____ Post Code _____

Phone _____ Mobile _____

Start Date with Employer ____ / ____ / ____

Interstate Registration Details

Are you registered in another state? Yes No

If yes, please provide details below:

State _____ Registration No. _____ State _____ Registration No. _____

State _____ Registration No. _____ State _____ Registration No. _____

State _____ Registration No. _____ State _____ Registration No. _____

Signature _____

Date ____ / ____ / ____

BOARD USE ONLY

Employer Registration Number _____ Employee Registration Number _____

Approved Yes/No _____ Signed _____