

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 _____