



## 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 ☐ No ☐  
Pensionable Yes ☐ No ☐  
Full time Yes ☐ No ☐  
Part Time Yes ☐ No ☐ No of Hours/Days \_\_\_\_\_  
Temporary Yes ☐ No ☐ Expiry date \_\_\_\_\_  
Fixed Contract Yes ☐ No ☐ 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

