



**HUMAN RESOURCES  
EMPLOYEE FUNDED EXTRA LEAVE  
DEFERRED SALARY SCHEME APPLICATION AND AGREEMENT**

Please complete all sections of this form and submit for authorisation with the Staff Leave form advising period of leave obtained under your chosen scheme.

**NOTE: dates must be consecutive.**

**SECTION 1 - PERSONAL DETAILS**

Employee number

First names  Family name

School/Admin dept.  Ext.No.

**SECTION 2 - DEFERRED SALARY SCHEME OPTION (please tick appropriate scheme)**

| Option   | From (dd/mm/yy)   | To (dd/mm/yy)   | Leave Obtained          |
|--|---|---|-------------------------|
| <input type="checkbox"/> 2 yrs service @ 80% of salary   | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | 6 mnths @ 80% of salary |
| <input type="checkbox"/> 4 yrs service @ 80% of salary   | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | 1 yr @ 80% of salary    |
| <input type="checkbox"/> 4.5 yrs service @ 90% of salary | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | 6 mnths @ 90% of salary |

**SECTION 3 - CONDITIONS**

Withdrawal from this scheme, prior to completing the required period of service, must be in writing advising the cessation date.

On withdrawal from this scheme, prior to completing the required period of service, you will be paid a lump sum payment at the % of salary paid during the period already worked.

There is not an entitlement to an equivalent period of leave for the period worked.

Superannuation contributions will be based on your % salary. If you elect to maintain superannuation contributions based on the full-time rate you are responsible for making the necessary arrangements for paying the difference between the employer's proportional contribution and the employer's contribution based on the full-time rate.

I understand that it is my responsibility to inform myself of all implications of the Deferred Salary Scheme before entering into such arrangement.

**SECTION 4 - SIGNATURES**

Employee signature  Date (dd/mm/yy)

Employee name (please print)

Signature of Approved Delegate  Date (dd/mm/yy)      Ext.

Name of Approved Delegate (please print)