

Member Salary Certificate		
Employer Name:		
Employer Address:		
Employer Telephone no:		
Employee Name:		
Position Held:		
Commencement Date:		
Probation Completion Date:		
Is Employment Status: Permanent, Fixed Contract or Temporary:		
Income Details		
Gross Basic Income Per Annum	Guaranteed: €	Regular: €
Gross Overtime Per Annum	Guaranteed: €	Regular: €
Gross Bonus Per Annum	Guaranteed: €	Regular: €
Gross Commission Per Annum	Guaranteed: €	Regular: €
Details of Salary Scale If Applicable:		
I certify that the above information is correct.		
Name:		
Position Held:		
Signature:		
Date:		
Company Stamp:		