Statement of Service Form

IMPORTANT INFORMATION

This form must be completed by the employer (not applicant).

This form is used to show that you meet the work experience in Queensland requirement. If you had more than one employer, then each employer will need to fill out one of these forms.

Provide a short, 3-4 sentence description about your company/business:

| EMPLOYERS BUSINESS DETAILS | |
|--|--|
| ABN: | |
| | How long has this business been operating?: |
| Business name: | |
| Trading name (if applicable): | |
| | |
| | |
| Parent name of business (if applicable): | How long has the business been operating at these premises?: |
| raterity and a substract (if approacte). | |
| | |
| | |
| Address where applicant is employed: | |
| | List other locations for this business: |
| | |
| Office phone number: | |
| Every all the second | |
| Email address: | |
| Web address: | |



EMPLOYEE DETAILS

Employee name:

Position and occupation (eg Project Officer (civil engineering)):

Employment start date (dd/mm/yyyy) or provide an outline of their employment history if there have been changes:

EMPLOYER DECLARATION

Employer to sign (not applicant). Signature:

Date of signature (dd/mm/yyyy):

Name of person signing:

Position within business:

Signatory phone and email:

How long is the position available to the employee?:

Is the position:

Full time Part time Casual

Temporary:

Employment end date (dd/mm/yyyy) (if still employed write not applicable):

List employees key duties and any additional information to support your employee (4 dot points):

PRIVACY STATEMENT

Migration Queensland is collecting information on this form to determine your eligibility for Queensland Nomination. This information will only be accessed by authorised employees within the agency. Some information may be given to other Queensland or Australian Government agencies for the purpose of assessing your application or to assist you to successfully settle in Queensland. Your information will not be disclosed to any other parties without your consent unless authorised or required by law.

INTERACTIVE FORM

This is an interactive form. Once electronically completed please save (do not scan).

