

# Long service leave claim form

Long Service Leave Act 1987 (SA)



## Complete this form if you:

- are a South Australian worker, and
- have completed seven (7) years of service. Unpaid leave is not counted as part of your service but does not necessarily break your continuous service, and
- have provided continuous service\*.

## The Long Service Leave Act 1987 (SA) may not apply to:

- Construction industry workers who are predominately employed 'on-site'. For more information contact Portable Long Service Leave on 8362 8111.
- The South Australian Public Sector. Long service leave entitlements are governed by the *Public Sector Act 2009* and any determinations of the Commissioner for Public Sector Employment.
- Workers whom, as of 31 December 2009, had award-derived long service leave terms set out in relevant industrial instruments (e.g. Enterprise Agreement, Australian Workplace Agreement [unless cancelled or rescinded], or Federal Award). For example workers in the vehicle industry where their employers are members of the Motor Trade Association and where membership commenced prior to March 2006.
- Workers employed within the Commonwealth Public Sector.

## Continuous service\*

A worker's continuous service is not affected by:

- absence in accordance with contract of service (e.g. Christmas closure)
- absence on account of illness or injury
- absence on account of long service leave or annual leave
- absence on account of any other approved leave (e.g. parental leave)
- the standing down of the worker due to slackness in trade where the worker is re-employed by the same employer
- a break in service brought about by the employer where the worker returns or is re-employed by the same employer within two months.

## More information

If you need assistance in completing this form, or if you would like to discuss your situation in more detail, please contact SafeWork SA on 1300 365 255.

## Submitting your form

Please submit your completed form and supporting documents to SafeWork SA:

In person: 9am to 5pm  
Level 4, 33 Richmond Road  
Keswick

Via post: GPO Box 465  
Adelaide SA 5001

Email: [help.safework@sa.gov.au](mailto:help.safework@sa.gov.au)

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Please ensure all questions are answered in full to ensure your claim is not delayed.

## 1. Your details

Surname: \_\_\_\_\_ First name: \_\_\_\_\_  
Address: \_\_\_\_\_ Suburb: \_\_\_\_\_  
Postcode: \_\_\_\_\_ Contact number: \_\_\_\_\_  
Email: \_\_\_\_\_ Date of birth: \_\_\_\_\_

## 2. Employer information

Name: \_\_\_\_\_ Trading name if applicable: \_\_\_\_\_  
Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Email: \_\_\_\_\_ ABN (as per payslip): \_\_\_\_\_  
Contact person at business: \_\_\_\_\_ Contact phone number: \_\_\_\_\_

Industry of employer: \_\_\_\_\_

## 3. Your claim details

Date you commenced work: \_\_\_\_\_ Date you finished work (if applicable): \_\_\_\_\_  
Employment status:  Full-time  Part-time  Casual

If applicable, who terminated your employment?

Was notice given (if yes, how much)?

What was the reason for termination?

Years of service with employer? \_\_\_\_\_ Hourly rate of pay (before tax)? \_\_\_\_\_

Did you take any unpaid leave during this time?  Yes  No  
If yes, please detail the reason and when leave was taken:

Did you receive a payslip?  Yes  No (If yes, please attach a copy)

Do you have any evidence to support your claim?

Have you attempted to resolve your claim with your employer?

## 4. Declaration

I \_\_\_\_\_ certify that the details I have provided are correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: In the course of managing your claim, SafeWork SA will need to contact your employer to request specific information about your employment and/or discuss the issues you have raised. This will result in your employer being provided with a copy of your claim form.

I give permission for SafeWork SA to contact my employer for the purpose detailed above.

I **do not** give permission for SafeWork SA to contact my employer for the purpose detailed above.