

## RECOGNITION OF PRIOR SERVICE APPLICATION FORM

**PLEASE COMPLETE AND [EMAIL](#) TO: Human Resources Branch, Division of Services and Resources**

This form is to be used by a staff member to request and give authorisation to obtain prior service details. Please see clause 4.11 Long Service Leave of the [University of Adelaide Enterprise Agreement](#).

### STAFF MEMBER DETAILS (PLEASE USE BLOCK CAPITALS)

Staff ID: \_\_\_\_\_ School/Branch: ..... Work phone: .....

Title: ..... Family name: ..... Given names (in full): .....

### PREVIOUS EMPLOYER DETAILS

Name of previous employer: .....

Address details: .....

City: ..... State: ..... Postcode: .....

Contact name: .....

Contact number: .....

### DATES OF PREVIOUS EMPLOYMENT

List periods of service with previous employer

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### AUTHORISATION (SIGNATURE REQUIRED)

**Staff Member**

I authorise the University of Adelaide to obtain all relevant information from my previous employer to enable the University to ascertain eligibility for recognition of prior service.

**Name** (*please print*): .....

**Signature:** ..... **Date:** .....