



Employment and Labour

Salary Schedule Form

Employee's ID Number:				
Employee's Initials & Surname:				
UIF Reference Number:				
Company Name:				
Period Of Service: Full dates please	From:		To:	

Period Year (s)	Salary Frequency Monthly	Salary Amount	Total Hours worked per month	UIF Deductions	Contributor/ Non-Contributor

Employer (Name and Surname):	
Signature Of Employer:	
Date:	

COMPANY STAMP

* PLEASE INDICATE DAY/MONTH/YEAR FOR EACH SALARY ADJUSTMENT, ALL FIELDS ARE MANDATORY

*Alternatively please register and file all declarations via <https://www.ufiling.co.za>