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