



**MOP(S) ACT EMPLOYEES**  
**LONG SERVICE LEAVE APPLICATION**

<p><b>Options for returning your completed form</b> Scan and Email to: <a href="mailto:MOPSPay&amp;Conditions@finance.gov.au">MOPSPay&amp;Conditions@finance.gov.au</a> or Post to: Ministerial and Parliamentary Services Department of Finance One Canberra Avenue FORREST ACT 2603</p>	<p><b>Enquiries:</b> Ministerial and Parliamentary Services Email: <a href="mailto:mpshelp@finance.gov.au">mpshelp@finance.gov.au</a> Phone: (02) 6215 3333</p>
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**EMPLOYEE DETAILS** ▶ Full name

**EMPLOYER DETAILS** ▶ Employer name   
▶ Employer state

**LEAVE DETAILS**

▶ Period of long service leave From  to

▶ Leave to be taken from  
 Full-time service entitlement  ▶ From  to   
 Part-time service entitlement  ▶ From  to

▶ Rate of pay  
 Full pay  ▶ From  to   
 Half pay  ▶ From  to

▶ Is prepayment required? No  Yes

▶ Address while on long service leave   
Postcode

▶ Telephone number

▶ Reason for taking long service leave (this is optional)

**SIGNATURES**

▶ By signing this form, I acknowledge that:

- I understand that knowingly giving false or misleading information is a serious offence under the *Criminal Code Act 1995*.
- I have read and understood the Privacy Collection Notice (see below).
- I understand that I am prohibited from engaging in employment during long service leave without the express permission of my employer.

**Signature of Employee**  Date

▶ Long service leave is: Approved  Not approved  ▶ Give reasons

**Signature of Employer or Authorised Person**  Date

Name (if authorised person)

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<b>OFFICE USE ONLY</b>	chris21 pay <input type="text"/>	Initials & date entered <input type="text"/>	Initials & date checked <input type="text"/>
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