

Long Service Leave Request Form

Pastor's Name: _____

Church: _____

How long has the Pastor worked for QB? _____

Leave Accrued? _____ weeks (if known)

Leave Taken? _____

Please TICK to indicate if your application is for:

Long Service Leave in course of service at current church

Start Date of Leave: _____

Number of Weeks: _____

Is the church's contribution to the fund up to date? please circle Y / N

Retirement / Settlement of Fund

This amount is paid as a lump sum and taxed at the marginal tax rate.

Last day acting in role: _____

Income between roles

Last day acting in role: _____

Number of Weeks: _____

Is your current church willing to extend your term to cover this period of leave? Y / N

Signature of Pastor: _____

The Church has approved this application and is willing to administer the payment of this benefit to the Pastor

Name of Church Representative: _____

Signature: _____

Please indicate your preferred method of payment by ticking the box:

- A direct deposit into the Church's Baplink Account
 A direct deposit into a Church Bank Account (as nominated below)

Name: _____

BSB: _____

Account: _____

Please post this form to:

Director of Administrative Services
QB, PO Box 6166, Mitchelton QLD 4053

Or email to:

dapa@qb.org.au