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Worker Registration Application for Western Australia

Personal Details (Please use block letters)

Last Name _____ First Names _____
Date of birth ____ / ____ / ____ ☐ Male ☐ Female ☐ Non-Binary ☐ Other _____
Address _____
Suburb _____ State _____ Post Code _____
Phone / Mobile _____
Email _____

Your Employment Details

Current Occupation/Classification (eg. Labourer, Carpenter, Bricklayer etc.) _____
Are you an ☐ Apprentice ☐ Working Director ☐ Partner
Current Employer _____
Address of Employer _____
_____ Post Code _____
Phone _____ Mobile _____
Start Date with Employer ____ / ____ / ____

Interstate Registration Details

Are you registered in another state? ☐ Yes ☐ No

If yes, please provide details below:

| | | | |
|-------------|------------------------|-------------|------------------------|
| State _____ | Registration No. _____ | State _____ | Registration No. _____ |
| State _____ | Registration No. _____ | State _____ | Registration No. _____ |
| State _____ | Registration No. _____ | State _____ | Registration No. _____ |

Signature _____

Date ____ / ____ / ____

Board use only

Employer Registration Number _____ Worker Registration Number _____

Approved? ☐ Yes ☐ No Signed _____