

## Employee application form - Commuting subsidy: Ferry claim

Please note: Receipt of this subsidy/assistance may affect Commonwealth Support Payments (either in full or in part). It is the applicant's responsibility to make enquires with Centrelink on the impact of payments under the Workers Assistance Scheme [prior](#) to applying for assistance

### Eligibility requirements

To be eligible to make a North Stradbroke Island (NSI) ferry claim, you must:

- have previously completed the employee application form and been approved for your nominated amount of commuting subsidy;
- continue to reside on NSI; and
- travel on the NSI ferries for the purpose of seeking employment, attending approved training, attending employment on the mainland or attending other approved appointments by the ESM.

Commuting subsidy claims can be made for a minimum period of four weeks and a maximum period of six months. This means that claims cannot be submitted more often than every four weeks. The commuting subsidy is available for up to two years from date of retrenchment, or until your nominated individual cap is reached, or until the WAS ceases – whichever comes sooner.

Proof of eligibility:

- Proof of employee identity (drivers licence or birth certificate as well as Medicare card)
- Proof of payments for your travel on NSI ferries over the period (i.e. ferry receipts)
- Proof of NSI residence (most recent rates notice or utility bill)

### Applicant information

Office use only - ESM to complete Case number:		Sibelco employee number:	
Title:	Surname:	Given name(s):	
Date of birth:			
Home address:			
Home phone:		Mobile:	
Email:			

### Commuting subsidy claim

What date range does this claim relate to?			from		to			
What is the total amount you are claiming for travel on NSI ferries, during the above date range?					\$			
Purpose of travel	Attending employment	<input type="checkbox"/>	Seeking employment	<input type="checkbox"/>	Attending approved training	<input type="checkbox"/>	Attending other ESM approved appointments	<input type="checkbox"/>
Office use only – ESM eligibility assessment					Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

### Applicant bank details

Account name:	
BSB:	Account number:

