



Grid Group Direct Personnel Form (Australia)

Site	Location	Start Date

Personal Details	
Full Name:	
Address:	
State:	Postcode:
Phone No:	Email:
Date of Birth:	
Licence No:	Licence Origin:
Passport No:	Passport Origin:
Emergency Contact Name & Number:	

Payment Details	
ABN Name:	
ABN No:	
Bank Account Name:	
BSB No:	Account:

Other	
White Card: Y / N	Card No:
Truck Licence: Y / N	Truck Licence No:
Security Class 1A Licence: Y / N	Security Licence No:
Police Check Completed: Y / N	Date Completed:
Shirt size for uniform:	

Insurance Type	Policy No
Workers Compensation	
Public Liability	

Please provide a copy of your Driver's Licence, Passport, White Card, Police Check and Certificate of currency for each insurance policy where required.

Please return the form when completed in full to admin@gridgroup.com.au

OFFICE USE ONLY			
Grid Personnel ID No:		Entered into MYOB:	Y / N
ABN No Confirmed:	Y / N	Entered into Database:	Y / N
VEVO Confirmed:	Y / N	Induction Completed:	Y / N