

## **PROJECT INJURY BENEFIT FORM**

This form is to be completed by the relevant Project Manager and forwarded to GPI Government Treasurer.

Employees Name:			
Project:			
Wage: \$		_	
Authorised By:			
Project Foreman:			
Signature:			
Project Manager:			
Signature:			
Start payment date:			
Finish payment date:			
	Note: A copy must go	in employees file.	

Date Policy last reviewed: 21<sup>st</sup> October 2021 Date Policy due for next review: October 2023