Claim for Time off work form

This form is used to claim compensation for time off work by an employee who is incapacitated for work, either partly or wholly, and continues to be employed by the Commonwealth or ACT Government. A claim for incapacity payments must be made by the employee and submitted to Comcare by the employee’s current employer.

**Surnames**

**Given names**

**Date of birth**

**Claim number**

**Date of injury**

**Current employer**

**EMPLOYER TO COMPLETE**

**Redetermination**

(for claim/s previously submitted to Comcare)  
(please tick)

**Periods in which partial or total absence from work occurred**

(periods should be submitted as whole weeks for all graduated return to work programs and for any total incapacity claims where incapacity is over 45 weeks)

**Actual weekly hours/minutes worked**

(enter total for the whole week)

**Actual earnings**

(salary paid for actual wks/hrs/ mins)

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<tr>
<th>From</th>
<th>To</th>
<th>Hours : Minutes</th>
<th>Dollars : Cents</th>
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**Yes**  
**No**  

**Actual earnings**

(salary paid for actual wks/hrs/ mins)

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**Yes**  
**No**

**Employee**

**signature**

**Privacy and your personal information:** Your privacy is important to us. For information about how we handle your personal information, please visit [www.comcare.gov.au/privacy](http://www.comcare.gov.au/privacy) or contact us on 1300 366 979 and request a copy of our Privacy Policy.

**COMMENTS** (must be completed if requesting a redetermination)

**Printed name**

**Signature**

**Phone number**

**Date**

**Public Holidays:** It is an employer’s responsibility to pay an employee for a public holiday based on the conditions in the agency’s enterprise agreement. Only the hours the employee actually worked that week (including any hours the employee would have worked on the public holiday if it were not a public holiday) should be included in “Actual weekly hours/minutes worked.”

Employer and employee should keep a photocopy. Employer to forward original to: Comcare GPO Box 9905 Canberra ACT 2601.