

Claim for standard sick pay benefit (SP1)

YOU MUST MAKE YOUR CLAIM WITHIN TWO MONTHS OF START OF ILLNESS/INJURY

Claimant should complete Section A below and your employer should complete Section B overleaf.

Instructions of how to claim sick pay benefit.

- Complete Section A of this form.
- Provide a doctor's certificate which must include the following information:
 - Your name.
 - Date from which you are deemed unfit for work.
 - Likely period of illness/injury from date unfit for work.
 - Doctor's signature, address and date of issue of certificate.

Alternatively, you can provide a copy of your Social Welfare Medical Certificates with this claim form. If you receive weekly Social Welfare Medical Certificates, a copy of each week's certificate should be supplied to CWPS.

A To be completed by the claimant in BLOCK CAPITALS

Attach your completed doctor's certificate (see note above) or alternatively provide a copy of your Social Welfare Medical Certificates. Please ask your employer to complete Section B overleaf.

Name:	<input type="text"/>	Date of birth:	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input type="text"/>	Member Id:	<input type="text"/>
Address:	<input type="text"/>	1st day of illness/injury:	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input type="text"/>	Have you returned to work? Yes	<input type="checkbox"/> No <input type="checkbox"/>
Telephone:	<input type="text"/>	If yes, when?	<input type="text"/> / <input type="text"/> / <input type="text"/>
Email address:	<input type="text"/>		

I confirm that the information above is correct and authorise my employer to give the Construction Workers Sick Pay Trust any further information required. I understand that I am responsible for any fee for obtaining medical evidence.

Employee's signature:

Date: / /

Payment will be made to your bank. Please provide your bank details.

BANK ACCOUNT DETAILS

This can be your current account, joint account or credit union account. It **cannot** be a savings/deposit account.

Name of Bank:	<input type="text"/>
Bank Address:	<input type="text"/>
Name on Account:	<input type="text"/>
IBAN No:	<input type="text"/>
BIC No:	<input type="text"/>
Signed:	<input type="text"/>
Date:	<input type="text"/> / <input type="text"/> / <input type="text"/>



Pass this form to your employer to complete section B overleaf.

You should make sure that you provide your employer with up-to-date medical certificates. This will ensure that there are no delays in processing continuous claims for sick pay benefits.

Instructions for employers on completing sick pay claim form.

- Complete Section B below.
 - Return this form with the claimant's medical certificate to the address below.
 - When the initial claim has been paid we will send you a continuous claim form (SP2) for you to complete.
- ! If the claimant is still absent from work, you must complete the SP2 form and return it to CWPS with any further medical evidence.
- ! No further payment will be made until you have returned both the SP2 form and current medical evidence to CWPS.

B To be completed by the employer

Please return this form to CWPS together with the claimant's doctor's certificate or a copy of a Social Welfare Medical Certificate.

1st day of illness/injury: / / CWPS Member Id No:

Has he/she returned to work? Yes No Nature of illness/injury (if known):

If yes, please state date of return: / / Is he/she still in your employment? Yes No

Date employee joined firm: / / If no, give the date the employment terminated: / /

Give inclusive dates of any holidays (public or annual) occurring during period of illness/injury: from / / to / /

Company name:

CWPS Employer Id no:

Work address:

Telephone: Email address:

Employer signature: Date: / /

Employer's Stamp:

Notes - General

1. Under the Rules of the Scheme, no benefit is payable for the first three working days of any period of illness and the maximum benefit payable is for 50 working days per year.
2. Benefit is not payable during official Construction Industry holiday periods, however, if the employer was open for business and work was available had the claimant not been sick we will need a letter from the employer to confirm this.
3. If the claimant was attending a SOLAS course for a certain period of time before the onset of illness, we will need a letter from the employer confirming the dates that the claimant attended the course.
4. Sick pay benefit is not payable for weekends and/or Public holidays.

Visit our website www.cwps.ie for further information.

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