

Accordant Group – Worker Application and Consent to Apply for the Short-Term Absence Payment

Background

The Government has announced that from 9 February 2021 businesses can apply for the Short-Term Absence Payment for its workers who are legally working in New Zealand. It is to help businesses keep paying eligible workers awaiting Covid-19 test results who:

- cannot work from home, and
- need to miss work to stay home while waiting for a COVID-19 test result (in line with [public health guidance](#)).

There is a one-off payment of \$350 for each eligible worker. This is regardless of whether the worker works full or part-time. It can only be applied for once, for each eligible worker, in any 30-day period (unless a health official or doctor tells the worker to get another test).

The person who has taken the COVID-19 test can be:

- a worker of the employer
- someone who is a dependant of the worker (e.g., children or a family member with a disability)
- someone who is a household contact or secondary contact (as described in [public health guidance](#)) of a person who has been identified as a close contact of a COVID-19 case.

You are an employee of an Accordant Group Company and have been advised by Healthline to undertake a Covid-19 test and are required to self-isolate while awaiting a Covid-19 test result. You have rostered work but cannot work from home and therefore need to miss work while you await the Covid-19 test result.

The test result you are/were awaiting is for (please tick one):

- Yourself
- You are the parent or caregiver of a dependent who is staying at home while waiting their Covid-19 test result.
- A household member or secondary contact (as described in [public health guidance](#)) of someone who is a close contact of a person with COVID-19, and the worker has been advised to stay at home while waiting for the close contact's test results.

The Covid-19 test was conducted on (insert date)

We have discussed with you the options available to you and you wish to (please select one option):

- You have a sick leave entitlement and wish to apply for sick leave for the period of time you await the Covid-19 test result and agree to the Company applying for the Short Term Absence Payment on your behalf. Sick leave will be paid in accordance with the Holidays Act.
- You have an annual leave entitlement and wish to apply for annual leave for the period of time you await the Covid-19 test result and agree to the Company applying for the Short Term Absence Payment on your behalf. Annual leave will be paid in accordance with the Holidays Act.
- You do not wish to use or have no sick or annual leave entitlement for the period of time you await the Covid-19 test result and agree to the Company applying for the Short Term Absence Payment on your behalf. You understand that if approved you will be paid as if you had worked for the day(s) you are absent while awaiting a Covid-19 test result. Your usual daily wages for the day(s) absence are calculated using RDP if this can be calculated or ADP if RDP can not be used.

No more than \$350.00 gross will be paid to you for the total period of absence while self isolating and awaiting the test result.

If your usual wages are less than or equal to the Short-Term Absence Payment, your usual wages will be paid.

Rostered Workdays Absence Due to Self-Isolation Applied For

You are applying for the following rostered workdays due to self-isolation as you were awaiting the results of a Covid-19 test and are unable to work from home:

First rostered workday of self-isolation (date).....

Last rostered workday of self-isolation (date)

Total rostered workdays of self-isolation (number).....

Consent

You consent to the following information being disclosed by us to the Ministry of Social Development in order that we can apply for the Short-Term Absence Payment on your behalf:

- Your name
- Your date of birth
- Your IRD numbers
- That we provide the Ministry of Social Development with any further information about you required for the Ministry of Social Development to make a decision about our application, and to audit and review any subsidy that is granted (to you or to another applicant) and how any subsidy granted is paid to employees; and

You can request access to information we have provided to the Ministry of Social Development in our application under the Privacy Act 2020 and can visit

<https://msd.govt.nz/form/msd/govt/nz/form.req2?requestType=wage-subsidy-payment-employee-information-request> to make a request.

I confirm the information I have recorded is true and accurate.

I understand I need to self-isolate in accordance with public health guidance while waiting for a Covid-19 test result. I consent to the Company applying for the Short-Term Absence Payment on my behalf.

Company Worked for (please circle below):

AWF Madison Absolutelt Jackson Stone & Partners

Name (please print)

Signature.....

Date.....

Branch to complete:

Approval:

Name: _____ Title: _____

Signature: _____ Date: _____

Leave Balances:

Annual Leave: _____ Alternative Leave: _____ Sick Leave: _____

RDP? Yes No Current hourly rate: \$ _____ Hours per day _____