



# Backfill Expense Claim Form

Employers of staff participating in the EM&D webinars may be eligible to claim a contribution for a maximum of 2 hours of backfill. The contribution offered is based on average casual rates for the linked position according to the relevant award.

To claim a backfill expense contribution, please complete this form and send it to [memberships@elaa.org.au](mailto:memberships@elaa.org.au) with subject line "EM&D Backfill Claim Form".

Claims will be processed up to the backfill quota for each webinar and are predicated on full attendance by the employee.

After determining eligibility for backfill, ELAA will issue a purchase order to the service. The service must then issue a tax invoice based on the purchase order details according to the rate identified in this claim form. Payment should be received within 30 days of submitting the tax invoice to ELAA.

| Workshop details                                       |   |           |  |
|--|---|-----------|--|
| Workshop name:   | EM&D Resource Webinar   |           |  |
| Date of workshop:                                      |   |           |  |
| Participant details                                    |   |           |  |
| Name of participant:                                   |   |           |  |
| Position:  |   |           |  |
| Backfill rates for position:<br>(Exc GST, for 2 hours) | <input type="checkbox"/> Teacher backfill: \$92.10<br><input type="checkbox"/> Diploma Educator backfill: \$63.90<br><input type="checkbox"/> Cert III Educator backfill: \$60.56<br><input type="checkbox"/> AGL backfill: \$66.86<br><input type="checkbox"/> Room Leader/Director/Manager/People Manager: \$103.33<br><input type="checkbox"/> Support Staff/Administrator/Bookkeeper: \$51.76 |           |  |
| Details of the Early Childhood Service                 |   |           |  |
| Service Name:  |   |           |  |
| ABN:   |   |           |  |
| Address:   |   |           |  |
| Suburb:  |   | Postcode: |  |
| Telephone:   |   |           |  |
| Email:   |   |           |  |

Please email this completed form to [memberships@elaa.org.au](mailto:memberships@elaa.org.au).