

GENERAL STAFF - VARIATION TO APPOINTMENT FORM

FORM 6.06C

USE TO VARY THE APPROVED HOURS AND/OR END DATE OF A FIXED-TERM EMPLOYMENT (TO A CUMULATIVE TOTAL OF 12 MONTHS ONLY)
 OR TO TEMPORARILY VARY THE APPROVED HOURS OF A CONTINUING APPOINTMENT

Division/Office: _____

Budget Unit: _____

Position Number: _____ Position Title: _____

Type of appointment: (tick appropriate box) Full-time Part-time _____ hrs/fortnight

CURRENT OCCUPANT:

Family Name: _____ Other Names: _____

Employee Number : _____ Job No: _____

Type of Change - New dates Variation to Hours

CHANGE OF DATES:
 New dates from ___/___/___ to ___/___/___
 (previous start date) (end date) - Revised? Yes
Personnel Office Use only :
 Now eligible for incremental progression to Step: _____ on ___/___/___ (date)

VARIATION TO HOURS:
 Original hours _____ per fortnight/week New temporary hours _____ per fortnight/week
 For the period from ___/___/___ to ___/___/___
New Temporary Fortnightly Roster WHERE Applicable (Note New Total Hours Per Day)

THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	Hrs/ Wk	Hrs/ F'night

Account Name: _____ Account code: _____ / _____ / 218 _____%

Account Name: _____ Account code: _____ / _____ / 218 _____%

Recommend appointment _____ / ___/___

I hereby **APPROVE** and **CERTIFY** that this appointment accords with the Enterprise Agreement, that the person is qualified to undertake the work, and that the salary is appropriate for the appointee's qualifications and experience.

_____/___/___
 (Head of Division / Office or other delegate) (Date)

PERSONNEL OFFICE USE ONLY



Papers attached and correct _____ / ___/___

For letter and data entry _____ / ___/___ Checked _____ / ___/___