

Request to Vary Employment

To advise Human Resources of changes to the employment arrangements of an ongoing or fixed term employee.

Section 1. REQUEST TO VARY

The Request to Vary Employment is a binding agreement only when signed acceptance (which may be in the form of an email) by the employee and duly authorised by two levels of management. This form may only be used to vary the following employment terms:

- Time Fraction (for a minimum of two weeks).
- Higher Duties Allowance (for a temporary or acting role for salary less than HEW 8 for a minimum of 2 consecutive weeks and for HEW 8 or greater for a minimum of 4 consecutive weeks.)
- Salary changes (agreed salary, performance loading and salary account code).
- Position changes (reporting line changes, position title changes and management unit title changes)

Completing a employment variation will not affect the validity or enforceability of the remaining contractual provisions (or parts of those provisions) of the employment contract which shall continue to have full force and effect.

Section 2. EMPLOYEE DETAILS

Employee Number (6 digit payroll no.):	Title (eg Prof, Dr, Mr, Ms):
Surname:	Given Names(s):
Management Unit:	Divison:
Position No:	Position Title:
Current Person Reports To (Name):	Current Position Reports To (Position No):

Section 3. TIME FRACTION CHANGE

Date of Change - Start:	End:
Time Fraction – Current:	New:

ROSTER – Where time fraction is less than 100%. Please provide both weeks details for the fortnight.

Roster Week One – Hours Worked – Monday start date

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Week Total

Roster Week Two – Hours Worked– Monday start date

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Week Total

Section 4. HIGHER DUTIES ALLOWANCE

Higher Duties Allowance - Start Date:	End Date:
Reason for HDA:	
Position Number of HDA:	Position Title of HDA:
Current Classification:	HDA Classification:
Time Fraction:	% of HDA: %
Reports to (Name):	
Does the HDA position have other positions reporting to it for EWSS purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Salary Account Code (11 digits): _____. Select Natural Ac - or other _____ %	

Section 5. AGREED SALARY – For TAFE Teachers complete HR form A6 TAFE Teacher Eligibility for Above Entitlement Salary

Start Date of Change:	Agreed Salary \$ (per annum):
Agreed salary subject to certified agreement increases? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 6. SALARY LOADING – Subject to Annual Performance Review

Loading - Start Date: End Date (if applicable): Amount (\$ or % of salary):

If loading relates to assuming specific responsibilities, state details:

Superannuation Contribution: - All salary loadings are superable except for the following schemes for which it is optional:

UniSuper Scheme (DBP/ICP) - employee is in UniSuper and salary loading is superable? No Yes

Higher Ed Only – For super contribution on loading, DVC approval is required. DVC Signature:

Section 7. POSITION CHANGE – New Position Details

NEW MANAGEMENT REPORTING LINE Reports To - Name: Position No:

NEW MANAGEMENT UNIT Name of Unit:

NEW POSITION TITLE Title of Position:

Section 8. EMPLOYEE'S ACCEPTANCE OF CHANGE TO EMPLOYMENT

I accept the above changes to my contract of employment pursuant to the relevant award / agreement as contained in that contract. The variation remains in force unless superseded by mutual agreement. As such no further correspondence will be required. I acknowledge that I may only vary my employment contract in accordance with section 1 of this form.

I accept that the University is a multi-campus institution and as such I may be required to operate from any campus within the University.

Name (print):

Signature:

Date:

Section 9. FURTHER INFORMATION

Please give a brief explanation for the change (or attach relevant documentation):

Section 10. SALARY ACCOUNT – Requires Authorisation of Head of Management Unit Only

Start Date of Change: End Date of Change:

Source of Funding: Extraneous Recurrent Research Project Other - *please specify*

Salary Account Code 1 (11 digits): _____. Select Natural Ac - or other _____ %

Salary Account Code 2 (11 digits): _____. Select Natural Ac - or other _____ %

Natural Ac Codes: 7005, Salary & Oncosts Academic; 7020 Salary & Oncosts Non Academic; 7015, Salary & Oncosts Academic (Sessional)

Section 11. AUTHORISATION – by 2 levels of Management

Head of Management Unit

Name (print):

Signature:

Date:

Director / Dean / Executive Director:

Name (print):

Signature

Date:

Vice-Chancellor / Deputy Vice-Chancellor / Vice President:

Name (print):

Signature

Date:

Higher Ed Only - I confirm that this appointment is consistent with the approved School Staffing Plan: Yes