

RECOMMENDATION TO SECOND FORM

Instructions for completing the Recommendation to Second form

- All recommendations to second must comply with the following:
 - the relevant Enterprise Agreements (adm.monash.edu.au/enterprise-agreements/) and
 - Workplace Policies and Procedures (adm.monash.edu.au/workplace-policy/)
- Please include the cost centre number and fund details
- Please include a position number. Position numbers may be found at: <http://sssd.adm.monash.edu.au/opm/login.asp>
- For part-time positions please attach a completed Change To Fraction Form (Professional Staff – Non –Trades) or Indicative Work Schedule Notification Form For Part-time Academics available at: <http://www.adm.monash.edu.au/human-resources/forms/>
- For Professional Staff, please provide a copy of the Position Description and Advice of Classification Outcome

SECTION 1 – NEW ORGANISATIONAL UNIT AND POSITION DETAILS									
Faculty/Division						Campus			
Organisational Unit					Org Unit No				
Position Title					Position Number				
<input type="checkbox"/> Academic		<input type="checkbox"/> Research		<input type="checkbox"/> Technical		<input type="checkbox"/> Trades & Services		<input type="checkbox"/> Administration	

Cost Centre					Fund					%

SECTION 2 – APPOINTEE’S PERSONAL DETAILS									
Personnel Number									
Title		Family Name			Given Name(s)				
Residential Address						Date of Birth			
						___ / ___ / ___ (DD/MM/YYYY)			
Postcode _____						Telephone No ____ - _____			
						Mobile No _____			
Email Address									

SECTION 3 – POSITION DETAILS									
Period of Secondment									
Start Date ___ / ___ / _____					End Date ___ / ___ / _____				
Secondment Type* (* Include Under Section 5 – Classified PD Attached)									
<input type="checkbox"/> Full-time			<input type="checkbox"/> Part-time			Hours per week _____ Fraction _____			
Employment Level (Salary)									
Pay Scale Group (Classification Level)			Level (Step)		Annual full-time salary rate \$		Annual pro-rata salary rate (if applicable) \$		
Supervisor Details									
Supervisor’s name									
Supervisor’s position						Contact number ____ - _____			

SECTION 4 – REASON FOR SECONDMENT

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SECTION 5 – ADDITIONAL COMMENTS

*Please include any specific terms and conditions of employment which relate to this position.
If this position requires the consideration of a Police Records Check prior to secondment, please indicate here.*

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SECTION 6 – AUTHORISATION OF ORGANISATIONAL UNIT

In recommending this secondment, I am satisfied that:

1. The person named in Section 2 is appropriately qualified and/or experienced to carry out the proposed duties and is an Australian citizen, permanent resident or has visa authorisation allowing this employment.
2. Funds are available and I authorise payment for the specified work.
3. The position has been evaluated in accordance with the descriptors contained in Schedule 6 of the Monash University Enterprise Agreement 2009 (adm.monash.edu.au/enterprise-agreements/)

<i>Authorisation 1 - Head of Department/Organisational Unit</i>		<i>Authorisation 2 – Dean or equivalent</i>	
Signature		Signature	
Please print name		Please print name	
Contact Ext No. _____	Date ___ / ___ / ___	Contact Ext No. _____	Date ___ / ___ / ___

SECTION 7 – AUTHORISATION OF SUBSTANTIVE UNIT

<i>Authorisation 1 - Head of Department/Organisational Unit</i>		<i>Authorisation 2 – Dean or equivalent</i>	
Signature		Signature	
Please print name		Please print name	
Contact Ext No. _____	Date ___ / ___ / ___	Contact Ext No. _____	Date ___ / ___ / ___

FOR HR OPERATIONS USE ONLY

Processed	Date ___ / ___ / ___	Checked	Date ___ / ___ / ___
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For assistance please contact HR Enquiries on 9902 0400

Please return completed form to HR Operations, Monash HR, Monash University VIC 3800

Monash HR privacy collection statement is located at <http://privacy.monash.edu/guidelines/collection-personal-information.html#hr>