MONASH University

Application for Voluntary Reduced Working Year Scheme

All applications for participation in the Voluntary Reduced Working Year Scheme should be in accordance with Clause 31 of the Monash University Enterprise Agreement (Academic & General) 2005.

Section 1 – Staff member's Details

Personnel Number									

Family Name	Given Names
Faculty/Department	
School/Section	Campus

Section 2 – Scheme Details

I wish to apply for the Voluntary Reduced Working Year Scheme as outlined in the Enterprise Agreement (please tick as appropriate)

☐ 50/52 (2 weeks additional leave) ☐ 48/52 (4 weeks additional leave)

☐ 46/52 (6 weeks additional leave) ☐ 44/52 (8 weeks additional leave)

Start Date for Voluntary Reduced Working Year: (must be the beginning of a pay period) ____/____/_____

Superannuation: (please tick appropriate)

I have elected to continue contributing superannuation payments at my current amount ☐, **OR**

I have elected to reduce my superannuation payments to reflect my reduced gross salary ☐

Section 3 – Declaration by Staff Member

1. I understand that under this arrangement I will be entitled to additional leave, as outlined above, and will receive salary proportionately reduced, spread across a 52 week period.
2. I acknowledge that should I take leave in excess of my entitlement under this scheme, due to resignation, change of fraction or early exit from the scheme, the university will offset this against my annual leave balance.
3. I acknowledge that I have read and understand the rules and regulations governing this scheme as outlined in the Monash University Enterprise Agreement (Academic and General) 2005 – Clause 31

Signature	
Date / /	Contact number:

Section 4 – Authorisation by Department

Authorisation 1 – Supervisor		**Authorisation 2 – Dean, Head of Department/Head of Admin Unit**	
Signature		Signature	
Please print name		Please print name	
Contact Extension No.	Date / /	Contact Extension No.	Date / /

HR OPERATIONS USE ONLY

Authorisation by Divisional Director, Human Resources Division or nominee. Approve: Yes ☐ No ☐

Signature	Date / /

Processed by	Checked by	Date / /	Pay Period

For assistance please contact HR Inquiries on 9902 0400

Please return completed form to HR Operations, Human Resources Division, Monash University, 710 Blackburn Road, Clayton, 3800

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Last updated: 16/05/07