**CONTRACT CHANGES FORM**

This form is to be used when a change needs to be made to an existing contract of employment or appointment.

Please note that HR will only be able to process changes that have been authorised by the relevant budget holder/ Institute Director/ Department Director or by Finance / JRES (where there are financial implications). **Please ensure that the form has the correct signatures before it is submitted to HR.**

If you have any questions regarding changes to contracts or appointments please contact HR. HR will write to the individual to confirm that the change has been made.

|  |  |
| --- | --- |
| **What do you want to do?** | |
| What changes are to be made to your employee’s contract or appointment | Choose an item. |
| Other actions not listed: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Current Position / Contract Details** | | | |
| Name of staff member: |  | Employee ID: |  |
| Job title |  | | |
| Department/ Institute |  | Line manager & contact number |  |
| Pay grade |  | Salary spine point |  |
| Type of contract | Choose an item. | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Changes to be made (please annotate the relevant change)** | | | | | |
| Allowance amount (eg Associate Dean) |  | | Contract extension length & expiry date | |  |
| Contract to permanent |  | | Change in hours / FTE | |  |
| New Job Title |  | | Change in PA’s | |  |
| New line manager |  | | Regrade to | |  |
| Working pattern change (include days & hours eg M7, W6, F7) |  | | If regrade, has the post been re-evaluated | | Choose an item. |
| *Additional comments if required:* | | | | | |
| **Coding/funding source (please note this must be completed for action)** | | | | | |
| Sub-project code | | Pro-type | | % charged to sub-project | |
|  | |  | |  | |
|  | |  | |  | |
|  | |  | |  | |
|  | |  | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **When are the changes effective from?** | | | |
| Start date | Click here to enter a date. | End date (if applicable) | Click here to enter a date. |

|  |  |
| --- | --- |
| **Manager Authorisation** | |
| Line manager/ budget holder signature |  |
| Date: | Click here to enter a date. |

|  |  |
| --- | --- |
| **Funding Authorisation. Changes must be approved by Finance or JRES (depending on the funding source) before being submitted to HR** | |
| Funding authorisation required from | Choose an item. |
| Funding Authorisation signature |  |
| Date: | Click here to enter a date. |

|  |  |
| --- | --- |
| **RRC approval** | |
| RRC approval is required if the post is:   * Being paid an allowance * Being extended (unless 100% grant funded) * Contract to permanent * Increase in hours (unless 100% grant funded) * Increase in PAs * Being regraded | Has the post been approved by RRC:  Choose an item.  Date of RRC meeting:  Click here to enter a date. |

|  |  |
| --- | --- |
| **HR ONLY** | |
| Date submitted to Human Resources | Click here to enter a date. |
| New salary spine point, if applicable |  |
| New salary, if applicable |  |
| Actioned by |  |