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| **Name of person requesting contract:** |
| **Contact number:** |

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| **Type of contract required:** |
| **Individual’s full name:** |
| **Individual’s address:**  **Tel :**  **Email :** |
| **Have they been employed by us before? If yes, in what capacity?**  No  Yes |
| **Type of work:**  *(e.g. Locum Research Fellow, Administrative Assistant, etc).* |
| **Start Date** |
| **End Date:**  *(Casual staff should not be employed for longer than an 12 week period).* |
| **Rate of Pay or required grade:** £ per hour. This is equivalent to grade |
| **Funding source:**  *(Please specify cost centre/grant code from which casual member of staff is to be paid).* |
| **Manager:**  *(Generally group head – specific line manager responsibility can then be delegated to individuals within the group).* |
| **Other specific requirements**:  *(For example specific place of work, any specific requirements for hours or days to be worked, etc).* |

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| **Please confirm that you have attached the following copy documents to this form:** | | | |
| All staff: |  | For clinical staff: |  |
| Proof of right to work in the UK |  | CRB disclosure <3 years old |  |
| Part completed casual payroll form (if being paid) |  | Professional registration certificate |  |
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