

PLEASE COMPLETE [AND](#) TO: Human Resources Branch, Division of University Operations [operations@adelaide.edu.au](mailto:operations@adelaide.edu.au)  
 This form is to be used when recommending staff for secondment from one position in the University to an approved Position Description/Role Statement and a copy of this form must be provided to the Staff Member.

**STAFF MEMBER DETAILS (PLEASE USE BLOCK CAPITALS)**  
 Staff

	eForm ID			
Faculty/School/Branch of secondment:				
Period of secondment (not to exceed current fixed-term contract)	Start date:		End date:	
Position title of seconded position:				
Position number:				
Classification of seconded position If any loadings apply, please provide details and approvals set			Salary step:	

If prescribed position please provide working with children check Unique ID / Reference Number												
The position reports to:												
Position number:												
Weekly hours of duty:										<input type="checkbox"/> Fulltime		<input type="checkbox"/> Parttime
WEEK ONE					TOTAL HOURS	WEEK TWO (PAY WEEK)					TOTAL HOURS	
	Mon	Tues	Wed	Thurs	Fri		Mon	Tues	Wed	Thurs	Fri	
minutes (decimal = 7.35 hours)												
GL Account Code:	Account		Fund			GL Dept		Campus		Project		
At the completion of the secondment the applicant will return position of:												
in the School/Branch:						or other position (please specify)						