

Notification of/Application for Additional Employment

Personal details and information relating to your employment with the Governing Body for Carisbrooke College and Medina College:

Full Name:		Title:	
Job Title:			
Workbase (if applicable):			
Hours of work per week:			
Pattern of hours: (e.g. 24/7 shifts, 8.30 am – 5.00 pm)			
Days worked:			

Declaration

I will have no other employment/work once I commence in my new post with the Governing Body for Carisbrooke College and Medina College.

Signed:		Date:	/ /
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Other Employment/Work Details

(N.B. You must include any other work for the Governing Body of Carisbrooke College and Medina College)

I have other employment/work or I am considering other employment/work including Bank/Casual/Agency, the details of which are below:

Organisation/ Company/ Agency:				
Job Title:				
Description of work undertaken:				
Type of work:	Paid	Unpaid	Voluntary	Casual
Hours per week:				
Pattern of hours: (e.g. 24/7 shifts, 8.30 am – 5.00 pm)				
Annual leave entitlement:				days/hours
Date commenced: (if already in additional employment)				

Declaration

I have read and understand the Governing Body for Carisbrooke College and Medina College's Additional Employment Policy, and I agree to comply with its requirements:

Employee Signature:		Date:	/	/
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Office Use Only

Name of Manager forwarded to:	
Date forwarded:	
Date discussed with employee: (if applicable)	
Date discussed with Headteacher	
Similar to post with Governing Body for Carisbrooke College and Medina College (please tick)	Yes No

Decision

(Please tick appropriate box)

Request approved	<input type="checkbox"/>
Request rejected	<input type="checkbox"/>
Comments from Manager and Headteacher:	
Date employee informed of decision	/ /