

Application Form for Part-Time Working Scheme

Employees intending to apply for Part-Time Working are advised to read the policy closely before submitting this application to their Head of School/Unit for approval. The complete application form must be sent to Employee Relations, HR a minimum of **3 months prior** to commencement of leave.

*Please note ALL FIELDS are Mandatory

	Applicant Details
Name:	
Staff ID:	Contact No.:
Jnit/School:	Grade:
Part 2	Details of Leave
	rking is a temporary arrangement of not less than 1 year and not more than 2 years, who ded on a permanent basis by applying at least 3 months prior to the expiry date of the
Period of Par	t-Time Working:
Start Date:	End Date:
Purpose of pa	art-time working arrangement:



'I HAVE READ AND ACCEPT THE TERMS AND CONDITIONS OF THE PART-TIME WORKING POLICY'

Signed:		Date:	
Employee			
Signed:		Date:	
Head of School/Unit	PRINT NAME		
Approved:		Date:	
Employee Relations Man	 nger		