



HUMAN RESOURCES  
CASUAL TEACHING EMPLOYMENT PROPOSAL

Please ensure these documents have been submitted to Human Resources or are attached to this form (tick boxes to indicate forms already submitted/now attached)

- Tax File Number Declaration form (otherwise maximum rate of tax will apply)
- Authorisation for Salary Transfer form (for payment to nominated account).
- copy Bio-data page (photograph page) of passport (if applicable)

**SECTION 1 - PERSONAL DETAILS (To be completed by the employee)**

Employee number         Title  Family name

First names  DOB (dd/mm/yy)

Gender  Home tel. no.  Address (postal)

P/code  Education/Qualifications

Are you an Australian citizen or a Permanent Resident? Yes  No  → Please supply a copy of the Bio-data page (photograph page) of your passport.

**SECTION 2 - SCHOOL USE**

Name of school

This is to confirm your appointment as a Casual Lecturer/Tutor/Demonstrator. The period of appointment will be from:       to       You will be required to perform the following duties:

Unit Number	Number of		Description	Comment
	Original	Repeat		

- Additional marking, eg, examination papers
- You are required to attend ..... lectures/come to ..... meetings during the semester
- You are required to be available to consult with students during teaching weeks for ..... hours per semester.
- You are required to conduct tutorials or consult with students during semester breaks or assessment period.
- You are required to mark the following assignments and provide the results to the Unit Co-ordinator, eg, 2 x 3000 word essays/student.  
.....
- Other .....

Unit	Co-ordinator		
Unit Number	Unit Name	Unit Controller	Extension

NB: The rates for lectures/tutorials recognise the component of teaching & associated time such as preparation and marking.  
In case of illness or any other reason that prevents you from attending a particular teaching activity you should advise the Unit Co-ordinator (name of Co-ordinator) ..... on extension ..... or the School on .....

Signature of Delegated Authority (See HR Delegations)  Date

Name (please print)

In approving this payment I confirm that I am an Approved Delegate and funds are available.

**Account to be charged**

Business unit      Project/grant         Account    %

**SECTION 3 - ACCEPTANCE (Employee to complete)**

Payment will be in accordance with the University's approved [casual teaching schedule](#). It should be noted that the rates for lectures/tutorials recognise the component of teaching and associated time such as preparation and marking. Please note as the number of students enrolled in the unit may fluctuate, it is possible that your appointment could be subject to variation or cancellation at any time during the semester.

Do you have any other teaching commitments at UWA this semester? No  Yes  → Hours per week

Name of School

**I ACCEPT THE CONDITIONS OF APPOINTMENT AS SPECIFIED IN THIS CONTRACT**

Employee Signature  Date (dd/mm/yy)

Employee Name