CHANGE OF POSITION COSTING FORM



This form is used to change account charging details for a position. It <u>must be signed by an Authorised Officer</u> before it is forwarded for processing to the Organisation Unit's Finance Officer or Faculty Human Resources Co-ordinator as appropriate. A copy must be retained in the Organisation Unit for audit purposes.

Organisation Unit No.:			Organisation Unit:			
Position No.:			Position Title:			
Commencement Date:	/	/	Expiry Date:	/	/	/

Record of Action Taken (as Authorised above)

N.B. Existing Position Costing Records **MUST NOT BE DELETED**. To amend the costing details, add a new record. For backdated changes of costing, a salary journal must also be requested.

COSTING DETAILS

% OF		CHIEF				
Salary	Op Unit & Site	Fund & Function	Project (optional)	Free Format Tag (optional)	INVESTIGATOR (RESEARCH ONLY)	INITIALS

RECOMMENDED BY:								
Signature of Recommender:	Print Name:							
Position Title:	Date:							
APPROVED BY:								
Signature of Authorised Officer:	Print Name:							
Position Title:	Date:							
HUMAN RESOURCES STAFF TO COMPLETE								
Details Entered by:	Date:							
Details Checked by:	Date:							