

HUMAN RESOURCES PROFESSIONAL & GENERAL STAFF CASUAL EMPLOYMENT AGREEMENT

This form is for staff who will work regular hours up to 1 month or irregular hours up to 12 months.

Please ensure these documents have been submitted to Human Resources or are attached to this form (tick boxes to indicate forms submitted/attached) Current Tax File Number Declaration form (otherwise maximum rate of tax will apply) Authorisation for Salary Transfer form (to allow payment to nominated account). Copy Bio-data page (photograph page) of passport or other evidence of eligibility to work in Australia (see section 3)					
School/Admin dept					
Enquiries to Extension					
SECTION 1 - PERSONAL DETAILS					
Are you new to the University? ☐ Current/previous employee? ☐→ Employee no.					
Title Family name					
First names Preferred first name					
Gender DOB (dd/mm/yy) Home tel. no. Mobile no.					
Address (postal) P/code					
SECTION 2 - POSITION INFORMATION (to be completed by the School)					
Job Title School/Admin dept					
Geographical Location WA Other State/Territory					
Start Date (dd/mm/yy) Expiry Date (dd/mm/yy) Level Step Step Step Step Step Step Step Step					
Position number Business Unit Project/Grant Account % Position number Business Unit Project/Grant Account %					

SECTION 3 - PERSONAL DETAILS (to be completed by the employee)

Evidence of Eligibility to work in Australia

Please provide evidence of your eligibility to work in Australia. Acceptable forms of evidence include:

If an Australian citizen

- Australian passport (certified copy of photograph page);
- 2. Australian citizenship certificate or certificate of evidence of Australian citizenship plus another form of photo identification such as a driver's licence; or
- If none of the above are available and you were born in Australia before 20 August 1986 Australian birth certificate plus another form of photo identification such as a driver's licence;
- 4. **If none of the above are available and you were born in Australia on or after 20 August 1986** Australian birth certificate showing that at least one parent was an Australian citizen or permanent resident at the time of birth plus another form of photo identification such as a driver's licence.

If not an Australian citizen

- Present original of passport or send certified copy to Human Resources as proof of identification and give consent to HR Services to check your visa details through the Visa Entitlement Verification Online (VEVO);
- 2. Provide a certified copy of any visa approval paperwork received from the Department of Immigration and Border Protection.
- 3. <u>Please note</u>: Primary student visa holders with an <u>8105 Work Limitation</u> are required to provide evidence that they have commenced their course of study or training before they can commence work. Evidence can include a Confirmation of Enrolment or a letter from their relevant education provider.

HUMAN RESOURCES GENERAL STAFF CASUAL EMPLOYMENT AGREEMENT (page 2)						
SECTION 3 - PERSONAL DETAILS (continued)						
Are yo	ou a student at UWA?	No 🔲	Yes □→	If yes, refer to 6.1, Minim	um Period of	f Engagement
Are yo	ou a scholarship holder at UWA?	No 🗌	Yes □→		work more than 8 hours per working hours (excepting	
Is this	your primary occupation?	No 🔲	Yes □→	If yes, refer to 6.1, Minim	um Period of	f Engagement
Emerç	gency Contact Details					
Name						
Addres	ss					
Relatio	onship			Contact No		
SECTI	ION 4 - DECLARATION					
Δhilit	/ to perform the requirements of t	the nosition				
or harror injurequire The Unrequire adjustr For fur Equity the Ma To hell followin	employee you have the occupational m. This means that you must inform ry that may, or will likely affect your ements of the position). niversity promotes the provision of a set these to perform their duties. You ments on account of illness, injury of their advice regarding employee and and Diversity Services (telephone of anager, Injury Management and We p identify staff that require adjustment of questions by ticking the relevant. Do you have a medical condition, diperform the inherent requirements of the services of	assistance, ai are required or disability, ai d employer ri 6488 3873). Fellbeing from Sents in their was box.	sor throughout form the required ds and equipment to advise your stany time during ghts and obligated for advice on make a safety, Health a corkplace and error y impairment for	the course of your employmments of the position (also remember (reasonable adjustments upervisor/manager promptly your employment. Tions around reasonable adjustments around reasonable adjudification to duties or equipment (telephone 64) ansure that these are provided	nent of any hereferred to as s) to employe y if you requi justments co pment provis 88 2784).	ealth matter is inherent ees who ire ontact sion, contact
	have indicated that you require a		an Occupation	nal Therapist from Safety,	_	_
will contact you to discuss your needs. 2a. Are you currently, or have you at any time within the last five (5) years, been in receipt of payments/damages arising from a workers' compensation claim; third party insurance claim (such as a motor vehicle accident claim); disability claim for sickness, incapacity, disability, injury or impairment; or from any salary continuance insurance claim (or similar)? Yes No						
2b.	Is the claim currently open or the be	enefit continu	ing?		Yes	□No
Comp wilfull	ry of a prior claim will not in itself ensation and Injury Management ly or falsely represents themselve ubsequent claim, a dispute resolu	t Act, if at an es as not hav	y time when se ving previously	eking or entering into em suffered from a disability	ployment a y which is th	person he subject
	If the University has concerns al during your employment, it may specialist or allied health profes	direct you to				

HUMAN RESOURCES

GENERAL STAFF CASUAL EMPLOYMENT AGREEMENT (page 3) **SECTION 5 - AGREEMENT** ☐ I accept the terms of the Casual Employment Agreement (CEA) and agree to comply with the terms and conditions of the relevant Staff Agreement. I accept that payments will be made on submission of authorised timesheets. □ Notice: I understand that the Agreement may be varied or terminated with one hour's notice on either side. I accept that there is no commitment to any further employment by the University. ☐ I understand that the UWA Code of Ethics and Code of Conduct details the University's expectations for the behaviour of all staff, including staff on casual contracts. I understand it is my responsibility to acquaint myself with the codes of behaviour expected of while employed at the University. ☐ I confirm that my total appointment(s) with the University does not total > 1.0 FTE. ☐ I confirm that I will complete the Occupational Health and Safety On-Line Induction within 1 month of commencing as a new staff member. ☐ I have completed the Declaration (page 2) and understand the inherent requirements of the role. ☐ If illness or any other circumstance prevents me from performing a particular activity, I am required to advise my Supervisor. ☐ I understand that as required under the Government's Superannuation Guarantee Charge legislation, the University will pay employer superannuation contributions on all earnings. The contributions are paid to the UniSuper Plan as required under the University of Western Australia Staff Agreements. ☐ I declare that: I have answered all questions honestly. To the best of my knowledge I am able to fulfil the inherent requirements of the position, or I will be able to fulfil the inherent ii. requirements with the provision of reasonable adjustments. iii. I understand that incorrect or misleading statements or omissions may render me liable for termination of my employment or disciplinary action and/or negate any future claim for compensable injury or illness. ☐ I authorise any medical practitioner, medical specialist or allied health practitioner that the University directs me to attend to provide information to the University, to enable it to determine: -Whether I am capable of fulfilling the inherent requirements of the position for which I have been appointed; and/or ii. To identify reasonable adjustments that the University can provide to enable me to fulfil the inherent requirements of the position. Employee signature Date (dd/mm/yy) Employee name (please print) **SECTION 6 - APPROVAL** ■ I approve the above and certify that:

- a. This appointment is a true casual appointment
- b. Sufficient funds are available in the account/s stated to cover the appointment
- c. The details in Sections 1 & 2 are correct
- d. The applicable rate of pay is that prescribed under the appropriate Agreement plus a 25% loading (https://www.his.admin.uwa.edu.au/his/gen_sals.asp)
- e. The appointee has been provided with a copy of the Fair Work Information statement (pages 5 & 6)
- f. The appointee understands the requirement to read UWA Code of Ethics and Code of Conduct

g. The inherent requirements of the role have been explained to the appointee.				
Name (please print)	Signature of Approved Delegate (See HR Delegations)			
Contact Number/Extension	Date (dd/mm/yy)			

HUMAN RESOURCES GENERAL STAFF CASUAL EMPLOYMENT AGREEMENT (page 4)

Useful HR Websites at UWA

(to be retained by employee)

HR Homepage: www.hr.uwa.edu.au

Every employee at UWA is allocated a unique 8 digit employee number on the University's Human Resources Information System (Alesco). This remains the same no matter how many times the employee leaves and returns to the University, however different job numbers may be allocated. To obtain your employee number, please contact your School Administrative Officer, School Manager or Human Resources.

Employee Self Service (ESS): www.hr.uwa.edu.au/ess

ESS Website: www.hr.uwa.edu.au/ess

First Login: use your eight (8) digit employee number and your initial password is your six (6)

digit date of birth—ddmmyy format.

View and update various personal details:

Your home address, postal address, emergency contact details, email address, internal mailbag delivery address, qualifications, employee demographics

View your payroll details:

View your payslips, update your bank account details, update your current deductions, choose your payment summary delivery method and view & print your payment summary

Inductions: www.hr.uwa.edu.au/working/new-staff/induction

Conditions of Employment: www.hr.uwa.edu.au/page/95944

Superannuation: www.hr.uwa.edu.au/policies/policies/pay/employee-benefits/superannuation

Equity & Diversity: www.equity.uwa.edu.au

Safety, Health and Wellbeing: www.safety.uwa.edu.au

Staff Contact Directory: directory.uwa.edu.au