

Fixed-Term Contract Extension Form

Please complete form in CAPITAL LETTERS	
MP's Name Con	nstituency
Employee Details: Title First Name	Last Name
Contractual Status	
Original fixed-term start date	
Original fixed-term end date	
New reviewed fixed-term end date	
Agreement to the above changes ✓ I agree with the above extension to my contract and agree to satisfy my contractual obligation as previous Employee's Signature: Date:	✓ I authorise IPSA to extend the contract and employment of the above mentioned employee from the date shown MP's Signature:
or place in the drop box in the Members Centre in	
d as set out in the IPSA Freedom of Information and Data Protection Pormitted to do so by law. IPSA is a public authority under the Freedom of der FOIA. Under the Data Protection Act 1998, you have the right to request, please contact IPSA's Data Protection Officer. IPSA may charge t	information it obtains, for the purposes of exercising its statutory functions olicy. IPSA may disclose information to third parties where it is required or of Information Act 2000 (FOIA). The information it holds may be disclosable equest a copy of the personal information which IPSA holds on you. To make a he statutory fee for access. For further information about how IPSA processes at IPSA, 7 th Floor, Portland House, Bressenden Place, London. SW1E 5BH.
r Payroll Use only: nere contract has been extended past an initial 3 month o plied appropriately.	employment, check that pension entitlement has been