

## **PART-TIME TEACHING APPOINTMENTS**

New Appointment for Session:				
School Discipline:			Are these additional hours to add to an existing contract?	
Contract Period:			If employed in previous sessions please provide Staff ID if available	
Appointee Details:				
Name:				
Address:			Date of Birth:	
			National Insurance Number:	
Email Address: (This will be required to liaise with the contract and associated document Please advise tutors that they will of the contract and associated document please advise tutors that they will on the contract and associated document please.	ts) collect their contract fro			
collection they will be required to b UK bank details.	oring their original passp	ort and	o visa (ir applicable) and also theil	r
Contract Details:		T		
Course (please input programme name or module name/number)	Rate per hour	includ	on for Appointment: (please de the role the appointee will rtake, and why this is required)	Total Hours
Costing Please complete both old and new				
Old Cost Code	Level 1 Level 2		Level 3 Level 4	
New Cost Code	Project Type Budg	get Group	Funding Source Budget Centre N	Iominal
Approved by Programme Leader			Date	
Approved by Dean of School			Date	
Approved by School Manager			Date	
Finance			Date	