SHARED SERVICES CENTRE USE ONLY - Initials / Date								
NI No.								
SAP								
Letter								
Ora	LG %							

ADJUSTMENT FORM



If an employee	e is movin			to either an establ nt form needs to b			post the app	propriate new
Employee name				Employee no				
School				School DfE no				
Current job title	•							
Adjustment Det	tails							
Effective date				s this initiate a hange in job			s, please complete the new job title & nchmark details (Single Status only)	
New job title								
Job family			В	enchmark ref	JE points			
				Previous	details		New o	details
Increase or decrease in hours Non single status only - Please provide names & hours for pupil/s where Special Needs Teaching Assistants hours are changing.								
Change to salary Please indicate pay point & FTE salary								
Change to weeks								
Extension of existing fixed term contract Please indicate dates and state reason below								
Change to personal details								
Other - specify								
Full details of a	nd/or rea	son for cha	nge – I	Please also provide a	any instructions	s specific	c to your school	
Full details of and/or reason for change – Please also provide any instructions specific to your school Please note – the cessation of any temporary contracts or variations will require the submission of the appropriate Leaver or Adjustment Form.								
Headteacher si	gnature						Date	
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Please upload onto Perspective Lite or Sharepoint, alternatively return to: Traded Team, HR Services, County Hall, Derbyshire, Matlock, DE4 3AG

If you have any queries about completing this form, please email traded@derbyshire.gov.uk

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