## **VARIATION TO PATTERN OF WORK AND REGULAR HOURS**



Use this form to vary a trainee's regular hours of work. A copy should be provided to the trainee and also forwarded to your Employment Coach and to <a href="mailto:awardenquiries@aflsportsready.com.au">awardenquiries@aflsportsready.com.au</a> as soon as possible, but at a minimum 7 days prior to the varied terms commencing.

Employer's De	etails							
Company Name:	AFL SportsReady Limited							
ABN:	92 067 484 146							
Authorised by:								
Host Employer's Details								
Company Name:								
ABN:								
Authorised by:								
Employee's D	etails							
Name:								
ID:								
Position:								
Nature of Agreement								
☐ Temporary variation ☐ Permanent variation								
Terms of Agreement								
_		o that the Employ	oo'o ordinam, haur	o of work will be y	varied to the			
The Employer and Employee agree that the Employee's ordinary hours of work will be varied to the following arrangement, effective from to								
		[start date]			[end date or ongoing]			
	Week 1							
	Start Time	Finish Time	Unpaid Meal Break Start Time	Unpaid Meal Break Finish Time	Total Hours			
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								

Sunday

	Week 2 (if fortnightly roster is used)							
	Start Time	Finish Time	Unpaid Meal	Unpaid Meal	Total Hours			
			Break Start	Break Finish				
			Time	Time				
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								

Inursday							
Friday							
Saturday							
Sunday							
The Employer and	d Employee ackn	owledge that:					
□ any variation to a second to the	to this agreement	will be made in w	riting,				
	will be paid for th	ne minimum daily	hours under the a	pplicable Modern	Award.		
	nt will be kept by t	he employer and	a copy provided t	o the employee.			
Signed as an	agreement						
Signed by AFL Sports Ready Limited			Ciarra	Signature			
			Sign	alure			
			Date	<del> </del>	· · · · · · · · · · · · · · · · · · ·		
Signed by Host E	mnlover						
olgiled by 1103t L	Прюусі		Sign	ature	<del></del>		
			Date	•			
Signed by Employ	VAA						
Signed by Employee				Signature			
			Date	•			
If the Employee is	s under the age of	f 18, also signed b	ογ:				
Full name of Emp	_	_	,				
Tull hame of Limp	loyee's Palent of	Legal Guardian.	Pare	ent / Legal Guardia	in		
			<del></del>	<del> </del>			
			Sign	ature			
			 Date	• • • • • • • • • • • • • • • • • • •			