

**Payment Information**

PLEASE ENSURE THAT ALL SECTIONS ARE COMPLETED OR INDICATE IF NOT APPLICABLE

EMPLOYEE DETAILS

Employee Name:	Phone (wk):
Employee ID #:	Fax (wk):
Building & Room Number:	Mobile:

PROGRAM & COURSE DETAILS

Program:	Bachelor of Business Administration Singapore Part Time	Course:	
Date of Visit:		Term:	Intake:

TEACHING ARRANGEMENTS (PLEASE INDICATE FOR TEACHING ONLY)

ABOVE LOAD <input type="checkbox"/> (Total Payment: \$6,500)			WITHIN LOAD <input type="checkbox"/> (Total Payment: \$1,000)		
Continuing <input type="checkbox"/>	Contract <input type="checkbox"/>	Casual <input type="checkbox"/>	Continuing <input type="checkbox"/>	Contract <input type="checkbox"/>	
This payment is for all academic responsibilities covered within the Timeline and Payment Information document, including marking of all assessment for the first 50 students.					
NB: All Offshore Allowances will be paid at the conclusion of the visit & marking of exam papers					

ABOVE LOAD SPLIT TEACHING ONLY (PLEASE INDICATE THE DUTIES TO BE UNDERTAKEN BY THE SECOND LECTURER)

INDIVIDUAL COMPONENT	PLEASE TICK	PAYMENT (PLEASE SPECIFY)	NAME OF LECTURER	PLEASE TICK				
				ABOVE LOAD	WITHIN LOAD	CONTINUING	CONTRACT	CASUAL
Course Coordination (incl. preparation of materials):	<input type="checkbox"/>	\$						
Visit:	<input type="checkbox"/>	\$						
Marking: First Fifty Papers:	<input type="checkbox"/>	Rate __						
Subsequent Papers	<input type="checkbox"/>	Rate __						
NB: Please note that marking of all assessment for the first 50 students is included in the above workload payment								

MARKING ARRANGEMENTS (PLEASE INDICATE ONLY FOR MARKING EXCEED 50 STUDENTS)

<input type="checkbox"/> Marking Rate 1 \$33.48 (simple assessment)			<input type="checkbox"/> Marking Rate 2 \$40.08 (standard assessment)			
ASSESSMENT	TIME ALLOWED FOR MARKING PER ASSESSMENT PIECE (PLEASE TICK ONE)					NUMBER OF PAPERS
Assignment 1	<input type="checkbox"/> 10 min	<input type="checkbox"/> 20 min	<input type="checkbox"/> 30 min	MAXIMUM TIME 30 mins		
Assignment 2	<input type="checkbox"/> 10 min	<input type="checkbox"/> 20 min	<input type="checkbox"/> 30 min	MAXIMUM TIME 30 mins		
Assignment 3 / Other	<input type="checkbox"/> 10 min	<input type="checkbox"/> 20 min	<input type="checkbox"/> 30 min	MAXIMUM TIME 30 mins		
Examination	<input type="checkbox"/> 10 min	<input type="checkbox"/> 20 min	<input type="checkbox"/> 30 min	MAXIMUM TIME 30 mins		
Total Time						Total Amount: \$

SALARY SACRIFICE (IF REQUIRED)

Amount in \$A:		Reason for Sacrifice:	
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SIGNATURES

HOS Signature:		Lecturer's Signature:	
Date:		Date:	

OFFICE USE ONLY:

Date Received:		Date Processed:	
Processed by:		Initials:	

Please return to the completed form to TSS, Level 1, 189 Hindley St.