

## SCHEDULE CHANGE OF WORKING HOURS LETTER

Employee Name: \_\_\_\_\_ Employee ID: \_\_\_\_\_

### Employer Information:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

### Current Working Hours:

Days of Work: \_\_\_\_\_

Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

### Proposed New Working Hours:

Days of Work: \_\_\_\_\_

Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

### Reason for Change:

This section should clearly outline the business or operational reasons for the proposed change of working hours, ensuring compliance with applicable Australian employment laws and any relevant awards or agreements. The reason must be reasonable, genuine, and clearly communicated.

### Employee Rights and Consultation:

The employee has the right to consult about the proposed change, including the right to provide feedback and discuss alternative arrangements. The employer commits to genuine consultation in accordance with the Fair Work Act 2009 and relevant modern awards or enterprise agreements.

### Effect of Non-Acceptance:

If the employee does not accept the proposed change of working hours, the employer may consider alternative options, including but not limited to redeployment, adjustments to duties, or, as a last resort, termination in accordance with applicable laws and contracts.

**EMPLOYER SIGNATURE**

Name:

Position:

Date:

Signature: \_\_\_\_\_

**EMPLOYEE SIGNATURE**

Name:

Date:

Signature: \_\_\_\_\_

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