

THIS SHEET IS TO REMAIN ON TOP OF FILE

Checklist for Employees Requiring Placement employee file

Employee name: **Kerrie Armstrong**

Pin: [REDACTED]

VR Offer: **Accepted**

Separation Date: **23 March 2014**

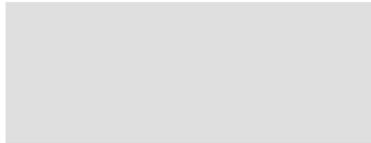
File to be completed in chronological order (*arranged in the order in which events occur or occurred. Place oldest at the back and newest in the front of file.*)

Document Name	Data (information only)	On File (tick)
Correspondence Sent; VR Offer letter / Withdrawal letter (PDF - signed and dated)	VR Offer Letter, 11/03/2014	/
Estimate	Received, 10/03/2014	/
Confirmation of receipt of VR offer letter (eg email read receipt or registered post acknowledgement)		
Decision form -signed	Signed	/
Separation advice - signed	Completed	/
Estimate - signed	Signed	/
Leave and service record - signed	Signed	/
Overpayment form (if originally issued to employee) - signed		
Database report	Report	/

When file checked for contents please place this checklist as the top most document (ie. First document you see when you open the file).

(document linked to ERP Reports Database / Linked to Word: Closed File Checklist)

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6_TEMPLATE.doc

Employee Requiring Placement: Decision Form

I have been provided with a copy of:

- *Directive 06/13: Employees Requiring Placement.*
- *Directive 11/12: Early retirement, redundancy and retrenchment.*
- *VR Estimate*

Having had the opportunity to consider the information in these directives and the advice provided in writing in a letter from **Lesley Dwyer, Chief Executive** dated **11/3/2014**.

I wish to accept the voluntary redundancy offer and cease my employment with Queensland Health with a separation date of: **23/03/2014**

I also understand that in the event I am re-employed within any Queensland Public Service entity within the severance period, I will be required to repay a proportion of the redundancy package, in accordance with the directive relating to early retirement, redundancy and retrenchment.

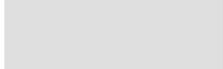
Have you received a severance payment from a previous employer, where this service has been recognised by your current employer?

Yes No

OR

I wish to decline the voluntary redundancy offer and pursue transfer opportunities. I understand that I must work co-operatively with my agency in seeking to secure a new placement, including applying for suitable vacancies. I also understand that:

- o if I do not participate in suitability assessment processes, I may be liable to a disciplinary process; and/or
- o if I refuse a transfer direction on two occasions and cannot demonstrate reasonable grounds for refusal, my employment may be terminated in accordance with s134 of the Public Service Act 2008 (extended to Health Service Employees via Schedule 2 *Applied provisions and rulings for health service employees under the Public Service Regulation 2008*); and/or
- o a formal review will occur four months from the date of my registration as an employee requiring placement (unless initiated earlier), to determine whether it is appropriate to continue the transfer efforts. If it is determined that further efforts are not appropriate, a retrenchment process will be commenced.

Employee signature:  _____

Full Name: Kerrie Armstrong

Date: 14/3/2014

Work Unit and Location: Barret Adolescent Centre - The Park Centre for Mental Health

Return to: 