Hours of work agreement or variation – full-time employees

You and your full-time employees can use this form to agree on a change to their regular hours of work. For more information about hours of work, visit www.fairwork.gov.au or call the Fair Work Infoline on 13 13 94.

Employee's detail	ls					
First name:						
Surname:						
Position:						
Details of agreed It is agreed that the ordina specified below: Effective from (date): Until (specify end date or 'e	ry hours of v	vork of the e	mployee abo	ove will be va	aried to the a	arrangement
		Wee	ek 1			
Day	Start time (e.g. 8:30am)	Break begins (e.g.	Return to work (e.g.	Finish time (e.g. 5pm)	Other times/ Breaks	Total (hours minus unpaid breaks)
		12:30pm)	1:30pm)			
Monday						hrs
Tuesday						hrs
Wednesday						hrs
Thursday						hrs

Friday

Saturday

Sunday

hrs

hrs

hrs

hrs

Total:

Week 2 (where a fortnightly roster is used)							
Day	Start time (e.g. 8:30am)	Unpaid break (e.g. meal break)		Finish	Other	Total	
		Break begins (e.g. 12:30pm)	Return to work (e.g. 1:30pm)	Finish time (e.g. 5pm)	Other times/ Breaks	(hours minus unpaid breaks)	
Monday						hrs	
Tuesday						hrs	
Wednesday						hrs	
Thursday						hrs	
Friday						hrs	
Saturday						hrs	
Sunday						hrs	
	•		1	•	Total:	hrs	

Signature of employee:	Date:/	/
Name of manager/supervisor:		
Signature of manager/supervisor:	Date: /	I

PLEASE KEEP A COPY OF THIS LETTER FOR YOUR RECORDS

Fair Work Ombudsman is committed to providing useful, reliable information to help you understand your rights and obligations under workplace laws.

It is your responsibility to comply with workplace laws that apply to you.

The information contained in this publication is:

- · general in nature and may not deal with all aspects of the law that are relevant to your specific situation; and
- not legal advice.

Therefore, you may wish to seek independent professional advice to ensure all the factors relevant to your circumstances have been properly considered.