

**APPENDIX 5****SCOTTISH BORDERS COUNCIL****JOB SHARE APPLICATION**

It is important that you read the Job Sharing Scheme Information (Section 8 of this Policy) and the additional information overleaf before submitting.

**POST TO BE SHARED:** \_\_\_\_\_

Service: \_\_\_\_\_ Location: \_\_\_\_\_

**DETAILS OF APPLICANT**

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

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

Work Telephone No.: \_\_\_\_\_

Grade: \_\_\_\_\_ Employee No.: \_\_\_\_\_

**DETAILS OF OTHER JOB SHARER** (if available)

Name: \_\_\_\_\_ Department: \_\_\_\_\_

(This person must also complete and submit a Job Share Application form.)

**DETAILS OF JOB SHARE**

**Proposed days**                      **Proposed times**                      **Days/Times unable to work**

Monday  
Tuesday  
Wednesday  
Thursday  
Friday  
Saturday  
Sunday

Please note that the total hours of the job sharers **must** equal one full time post.

### **ANY OTHER RELEVANT DETAILS**

You must sign and date the form overleaf should you wish to make an application for Job Sharing. Then return the completed application to your Director with the attached sheet for their comments.

#### **Mandate**

I authorise and empower the Council, should I withdraw my application for Job Share or fail to remain in the Job Share post for 6 months, to recover by deduction from any salary, wages or other monies which may be due to me from the Council, any sum payable by me as reimbursement of costs incurred by the Council as a result of the application (such as advertising, recruitment and administration costs) as calculated by the following formula:

- a) the whole of the sum due if I withdraw the application or leave within 3 months of the arrangement taking effect;
- b) a proportionate part thereof, namely the whole less  $\frac{1}{3}$  for each completed month of service over 3 months, up to 6 months.

Signature\_\_\_\_\_ Date\_\_\_\_\_

Should you have any queries please contact Human Resources Case Management Team telephone 01835 825015/ skype: askhr or [askhr.scotborders.gov.uk](mailto:askhr.scotborders.gov.uk).

**SCOTTISH BORDERS COUNCIL****JOB SHARE APPLICATION –DIRECTOR’S COMMENTS**

Post to be shared: \_\_\_\_\_

Department: \_\_\_\_\_ Location: \_\_\_\_\_

Applicant's names: 1. \_\_\_\_\_

2. \_\_\_\_\_

Please give your comments on

- i) the suitability of the post for job sharing
- ii) the feasibility of the arrangements proposed by the applicants
- iii) any other relevant comments.

\* I do/do not support this application for job share.  
(Please delete as appropriate)

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Director**DIRECTOR PEOPLE PERFORMANCE AND CHANGE COMMENTS**

\* I do/do not support this application for job share.  
(Please delete as appropriate)

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Director People Performance and Change