CASUAL WORKER SERVICES

**AT COLCHESTER INSTITUTE (the “College”)**

This document sets out the basis on which it has been agreed that you will provide services to the College as a casual worker.

**1. Provision of Services**

The College from time-to-time requires individuals to provide services on a casual basis. Such services are required throughout the academic year, on an ad hoc basis.

The College may from time to time offer you assignments as a casual worker. The College is not under any obligations to consider you for, or offer to you, any assignment and you may accept or decline the offer of any assignment without the need to give any reason.

Each assignment, which is offered to you by the College and accepted by you, forms a separate contract between you and the College, governed by the terms of this document.

2. **Fee**

For each assignment undertaken by you and satisfactorily completed, you will be entitled to an agreed fee. The fee will be subject to the deduction of National Insurance and taxation at the applicable rate.

You must complete a timesheet for each assignment, and fees will not be payable until a properly completed timesheet is received.

3. **Eligibility to work in the UK**

You must provide proof of your eligibility to work in the UK prior to starting your first assignment with us. This should be your passport, or if a passport is not available, then a full birth certificate, and proof of your National Insurance number e.g. National Insurance card, P60 or P45. Failure to provide the correct documentation will result in delaying your payment.

4. **Your Obligations**

You must complete each assignment properly, in accordance with any instructions or procedures issued by the College.

If, having accepted an assignment, you find that you will not be able to carry it out, you must inform the College by telephone as soon as possible in order to allow other arrangements to be made.

You should always ensure that you maintain the confidentiality of information relating to examinations or other matters related to the College, its staff and students. You must not disclose to any other person any information relating to an assignment without the express consent of the College.

5. **Your Status**

You agree as a condition of this agreement that you will provide services to the College as a casual worker.

Both parties agree that no mutuality of obligations arise out of this or out of the formation of this agreement.

6. **Your responsibility for Safeguarding and Child Protection**

The College is committed to the rights of learners within all its learning locations; it is committed to promoting their welfare, protecting their physical and psychological wellbeing and safeguarding them from all forms of abuse. Colchester Institute expects all staff, volunteers and contracted staff to share this commitment. The College will act in ways that best safeguard the interests of learners.

If you have any safeguarding concerns whilst working with our learners please contact one of the Colleges safeguarding officers who can be contacted on the following numbers:

**Colchester/Clacton Staff 01206 71(2828)**

**Braintree Staff 07565 698867**

*If you have any general concerns on safeguarding procedures please discuss with the appropriate College Manager for your area. A copy of the Policy and further information on safeguarding is available on the Colchester Institute Portal.*

***Please sign and return the attached copy of this document in order to signify that you accept the terms set out in it.***

For and on behalf of

Colchester Institute

*I have read the terms set out in this document. I understand and accept them.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed** |  | | |
| **Date** |  | Title |  |
| **Name (Please print)** |  | | |
| **Address (Please print)** |  | | |
| **Date of Birth** |  | | |
| **Telephone Number** |  | | |
| **Email address** |  | | |
| **National Insurance Number** |  | | |
| **Name of Bank or Building Society** |  | | |
| **Branch Address** |  | | |
| **Sort code** |  | | |
| **Account Number (8 digits)** |  | | |
| **Roll Number (if applicable)** |  | | |

**HOURS/PERIOD ACTUALLY WORKED**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **From** | **To** | **Hours Claimed** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I certify that the details given above are correct and have not previously been claimed.

Signed: .................................................................

I certify that this claim is a correct statement and that payment of £.............................. is due.

Signed: ........................................................... Date : ……………………………

Name: ………………………………………………… (Manager) Budget Code: ………………………..