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| **PAID INSIDE WORK – COMMERCIAL ACTIVITY (ACADEMIC STAFF)** **Application for Approval Form** |

All paid inside work performed by academic staff for commercial activity, must be approved prior to the commencement of any work. The requesting staff member / manager is responsible for providing all the necessary information and obtaining appropriate approvals. This application must be completed in accordance with the provisions of the University’s [Commercial Activities Policy](https://policy.acu.edu.au/document/view.php?id=413) and [Procedure](https://policy.acu.edu.au/document/view.php?id=414).

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| **KEY CONSIDERATIONS FOR INSIDE WORK: COMMERCIAL ACTIVITY (ACADEMIC STAFF)** |
| **Paid Inside Work: Commercial Activity** is an arrangement by which suitably qualified academic staff may provide services to the University separate from or in addition to their normal work. For consultancies and commercial activities, as defined in the [Commercial Activities Policy](https://policy.acu.edu.au/document/view.php?id=413), a maximum annual limit may apply.  Before completing and signing below, it’s important to note:   * **Paid Inside Work: Commercial Activity** does not replace an individual member’s annual hour of work or requirements for availability. * **Paid Inside Work: Commercial Activity** requests must be approved in advance of any work being undertaken. * **Paid Inside Work: Commercial Activity** requests will only be considered when a staff member has a full annual academic workload and where the activity cannot reasonably be accommodated within workload. * **Paid Inside Work: Commercial Activity** will be paid at an hourly rate commensurate with a staff member’s salary, excluding oncosts. * Superannuation on payments will be processed at the Minimum Superannuation Guarantee rate. * **Paid Inside Work: Commercial Activity** payments will only be processed if the project named on this application is funded and a project code is provided. * Staff members may be required to provide evidence of hours worked under this agreement. * The University may stop payments if the project contract is cancelled, or the staff member does not complete the work as agreed. |

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| **DETAILS OF STAFF MEMBER RECOMMENDED FOR PAID INSIDE WORK (COMMERCIAL ACTIVITY)** | | | | | |
| NAME: | | | STAFF CATEGORY  ⬜ Academic | | |
| FACULTY/DIRECTORATE: | | | CAMPUS: | | |
| SCHOOL/WORK UNIT: | | | PHONE: | | |
| **DETAILS OF PROPOSED ACTIVITY** | | | | | |
| Project Name: | | |  | | |
| Project Lead: | | |  | | |
| Brief description of work to be undertaken:  (please provide sufficient information to enable evaluation of the appropriateness of the proposed activity): | | | | | |
| Duration of activity  Start date: | | | Proposed time commitment required:  \_\_\_\_\_ hours per week for \_\_\_\_\_ weeks; or  Total hours requested**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| Finish date: | | |
| **FINANCIAL INFORMATION RELATING TO THE COMMERCIAL ACTIVITY** | | | | | |
| Funding Source: | | |  | | |
| Funding Secured: | | | ⬜ YES ⬜ NO | | |
| Costing details of requesting unit (for remuneration as outlined below plus relevant on costs):  Account Code: *\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_*  Entity Project Source of Fund Natural Account | | | | | |
| **AGREEMENT BETWEEN STAFF MEMBER AND ORGANISATIONAL UNITS** | | | | | |
| 1. Nominated supervisor requesting **Paid Inside Work: Commercial Activity** (if outside staff member’s normal reporting line) | | | | | |
| Nominated Supervisor Name: | | Nominated Supervisor Signature: | | | Date: |
| 1. Member of the Executive of requesting unit | | | | | |
| ⬜ I recommend ⬜ I do not recommend  this application for **Paid Inside Work: Commercial Activity**. | | | | | |
| Member of the Executive Name: | | Member of the Executive Signature: | | | Date: |
| 1. Nominated Supervisor of Staff Member | | | | | |
| I confirm that:   * This application for paid inside work complies with the requirements of **Paid Inside Work: Commercial Activity**. * The staff member recommended to undertake **Paid Inside Work: Commercial Activity**, is performing all the requirements of their substantive role to a satisfactory standard for a competent staff member through the annual Progress Planning process. * The academic staff member recommended to undertake **Paid Inside Work: Commercial Activity** has a full annual academic workload of 1590 hours, or equivalent pro rata for fractional staff.   ⬜ I support ⬜ I do not support  this application for paid inside work to be undertaken by the proposed staff member. | | | | | |
| Reasons for not supporting the proposal (if applicable): | | | | | |
| ⬜ The staff member will be able to undertake this activity in addition to normal workload and is to personally receive  remuneration for the work performed. All remuneration is processed through the University’s payroll. | | | | | |
| Nominated Supervisor Name: | Nominated Supervisor Signature: | | | Date: | |
| 1. Staff Member | | | | | |
| * I have read the ACU [Commercial Activities Policy](https://policy.acu.edu.au/document/view.php?id=413), and this activity complies with the requirements of the policy. * I am willing and able to undertake the proposed activity as outlined in this application. * The proposed **Paid Inside Work: Commercial Activity**, does not interfere with my requirements for availability and undertaking my normal workload. * I have a full annual academic workload of 1590 hours (or pro rata for fractional Academic Staff).   Payment arrangements (where the work is in addition to normal workload, and I am to personally receive remuneration for the work performed):  ⬜ I wish to receive payment for this activity as part of my normal salary, with tax deductions made in line with tax legislation. | | | | | |
| Staff Member Name: | Staff Member Signature: | | | Date: | |
| **APPROVAL BY MEMBER OF THE EXECUTIVE** | | | | | |
| ⬜ I approve ⬜ I do not approve  this application for paid inside work for commercial activity to be undertaken by the proposed staff member. | | | | | |
| Approving Officer Name: | Approving Officer Signature: | | | Date: | |
| **PRIVACY INFORMATION** | | | | | |
| Please refer to the Australian Catholic University [Privacy Policy](https://policy.acu.edu.au/document/view.php?id=190) for details as to how personal information collected on this form will be used and disclosed. | | | | | |
| **PAYMENT PROCESSING, RECORD KEEPING AND FILING** | | | | | |
| * This completed and signed form will be provided to People and Capability (P&C) and will become part of the employment record. * Where payment to the individual is approved, P&C will process the salary payment in the relevant pay fortnight through the University’s payroll system. * Where the work is performed within normal workload and an internal transfer of funds is required, the requesting unit must contact Finance to arrange this. * A copy will be retained by the Faculty/Directorate. | | | | | |

**Please submit a copy of this completed form to** [**Service Central**](https://acu.service-now.com/service_central?id=service&sys_id=1c8859a7dbf86f404f95cae43a96198b) **using the ‘Paid Inside Work’ request.**