

Refer to the [Relocation Assistance Policy](#) and [Procedures](#) before completing this agreement. The Policy provides a definition of eligible dependents.

PERSONAL DETAILS

Name:

Contact phone number/s:

If your family is accompanying you, please provide details of dependents:

Name	Relationship to new appointee / existing employee (eg partner, daughter)
.....
.....
.....
.....

ACCOMMODATION ASSISTANCE *(appointees relocating from overseas only)*

Note: Appointees relocating from within Australia receive a taxable settling-in allowance on the first pay day after they commence.

If you are relocating from overseas, please indicate the type of assistance required:

- One week of temporary accommodation; or
- Payment of a taxable 'Settling-In Allowance'.

DECLARATION

I have read, acknowledge and accept the conditions of the University's [Relocation Assistance Policy](#).

Should I resign or retire within two years of commencing my appointment, the University has my authority to deduct any repayment of travel and removal assistance from salary and termination payments the University owes me.

Signature: Date:

If you sign this form with a digital signature, return it using the submit button below. Alternatively, print, sign, scan and email the form to hrofficer@scu.edu.au.



Privacy Notice

Southern Cross University collects, stores and uses personal information for the purposes of administering recruitment and employment. The information collected is confidential and will not be disclosed to third parties without your consent, unless we are required by law. The requested information is required to facilitate your employment; it is not required by law. To access or update your information please contact hr@scu.edu.au. For further information refer to the [University's Privacy Management Plan](#).

[Aug17]

OFFICE USE ONLY			
Settling-in Allowance:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Temporary accommodation required <input type="checkbox"/> Yes <input type="checkbox"/> No
Payroll advised:	Original tickets / receipts provided	<input type="checkbox"/> Yes
Expense Claim sent to HOWU for processing:			
<input type="checkbox"/> Yes	Date:.....		