## FTM/CMW ABSENCE NOTIFICATION FORM



Name of FTM/CMW*:									
Client and Site:									
Type of Engagement:	Casual Perm Arran			Arrange	ement Other				
Type of Absence:	Personal/Carer's (i.e. Sick)				P	Planned			
	Without Pay				C	Other (please specify)			
Absence Start Date:					Abser	nce En	d Date:		
Total Number of Working									
Hours or Rostered Shifts Absent:									
Signature of FTM/CMW:						Dat	e:		
Cover for Site operational requirements Required (e.g. Emergency Standby/Critical Pos)	Yes	No		(This	exclud	es Pers	sonal Care	er's Leave	circumstances)
Name of Client Supervisor:									
Client Supervisor Notified?:	Yes	No	Ti	me:	: a	m p	om	Date:	
Name of Client Superintendent:					(	(Only R	lequired it	f Superviso	r unavailable)
Leave Accruals Checked?:	Yes		No				Not Appl	licable	
Time Absence Notified to WorkPac?:	Yes	No	Ti	me:	: a	m p	om	Date:	
Name of WorkPac Contact:									
Signature of WorkPac Contact:						Date:			

## **PROCEDURE FOR ABSENCE MANAGEMENT**

**For planned absences:** The FTM/CMW is required to seek approval from your WorkPac representative by submitting this form (prior to the planned absence). FTM/CMW's are required to give a reasonable amount of notice as outlined in the WorkPac Agreement. Where the leave has been approved by your WorkPac representative and by your WorkPac Recruiter, the FTM/CMW is required to notify their immediate Client Supervisor of the planned absence.

**Personal Carer's Leave:** the expected process is that you notify your immediate Client Supervisor by telephone call (only) prior to the start of shift that you are unable to attend work AND then you must notify your WorkPac contact immediately thereafter by phone call (only). On your return to work you must immediately complete this Absence Notification Form.

Please be advised that a repeated and wilful failure for WorkPac employees to adhere to this procedure may be deemed to be a failure to follow a legal and reasonable instruction by WorkPac. This could lead to disciplinary action, which may result in termination of their employment.

**Casual FTMs/CMWs:** Must follow the above process by identifying specific shifts that they are not available for and what their next available next shift would be if there is any availability on that particular roster (e.g. prolonged absences).

Please contact your WorkPac Recruiter, WorkPac Site Contact or the WorkPac ER team on email <a href="mailto:ContactUs@workpac.com">ContactUs@workpac.com</a> for any clarity and or concerns regarding this form.

\*FTM - means Field Team Member/CMW - means Coal Mine Worker (i.e. Both WorkPac Group Employee).