Payroll Use Only – Employee Number

**MP’s Name** CAPITAL LETTERS **Constituency**  CAPITAL LETTERS

**Staff Member Details:**

Title First Name Last Name

**Amendment to Salary**

**Only complete this form if you want to award more than the 1% automatic increase from 1st April 2021**

£

£

Current Salary (per annum) **Revised Salary including 1% (per annum)**

I confirm that this temporary pay rise is **not** a substitute bonus payment

Yes 🞏

Date effective from

End date (if temporary change)

**Changes to weekly hours**

Current Hours (per week) Revised Hours (per week)

Date effective from

Hours **Per day** Mon Tue Wed Thu Fri Sat Sun

(number of hours in each box)

**If this contractual change should be costed to the Staff COVID budget please tick this box and provide any additional information in the comments box if necessary**

**From Staff COVID Budget?**

**Further Information:**

**Change to job title - For a change in job title please submit a new Job Description and Variation Letter**

Current Revised

Job Title Job Title

**Authorisation and Declaration**

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| * I hereby authorise IPSA to make the salary amendment outlined above
 |
| Staff Member’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | MP’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

***Note: Amendments must be received before the 15th of each month. If the 15th falls on a weekend then the payroll cut-off is the previous working day.***

**Please email this signed form to** **payroll@theipsa.org.uk**

**Alternatively, please send your completed form to IPSA, 2nd Floor, 85 Strand, London, WC2R 0DW.**

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| **Data Protection** IPSA collects and processes personal information about you to exercise its statutory functions, to provide you with the services you have requested and where it is in our legitimate interests to do so. We will only use the information you provide on this form for the purposes set in the form and in any relevant related guidance to provide you with the services you have requested, to exercise our statutory functions or where we are otherwise required by law.  We may disclose information to third parties where it is fair and lawful to do so, while respecting your privacy rights. Information about how we use and protect your personal information, and your data protection rights is set out in the IPSA Privacy Notice available on our [website](https://www.theipsa.org.uk/about-us/privacy/). You can contact us by email to privacyrights@theipsa.org.uk or by post to IPSA, 2nd Floor, 85 Strand, London, WC2R 0DW.**Freedom of Information**Information held by IPSA may be disclosable under the Freedom of Information Act 2000. Information about the Act for MPs and their staff is available on the IPSA [website](https://www.theipsa.org.uk/ipsa-for-mps/guidance/ipsa-and-the-freedom-of-information-act/). |
| **Payroll use only** **Keyed by *X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Checked by *X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |
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**If you have any questions about completing this form, please call 020 7811 6400 / Option 2.**