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| **PERMANENT/TEMPORARY CHANGES FORM** | **072 Tower Hamlets GP Care Group** |

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| **For Completion by manager** |

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| **Please enter an X in the appropriate box below:** |
| Permanent Change |  | Temporary Change |  |
|  |
| **EMPLOYEE DETAILS:** |
| Full name |  |
| Assignment Number |  |
| Job Title |  |
| Department |  |
| Work Base |  |
| Date of Change |  |
| End Date (if applicable) |  |

**Details of Change**

***All other details remain the same***

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Signature** |  | **Date** |  |
| **Manager Name** |  | **Manager Post Title** |  |
| **Manager Signature** |  | **Date** |  |

A signed copy should be given to the Employee for their records

|  |
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| **NHS PAYROLL SERVICES – For Completion by NHS Payroll Services** |
| **Payroll Processed - Date** |  |  **Payroll Officer** |  |

The completed form should be scanned and emailed to:

**Nigel.Hudspith@northumbria-healthcare.nhs.uk**

AND

**thgpcg.hradmin@nhs.net**