

OFFER OF CASUAL EMPLOYMENT HEALTH DECLARATION FORM

OFFER OF CASUAL EMPLOYMENT TO:

POSITION TITLE:

ACCEPTANCE: I accept the abovementioned offer of casual employment with the University of Western Sydney and:

I certify that:

a) I am not aware of any health condition that might interfere with my ability to perform, or be aggravated by, the requirements of this position;

OR

b) I have a health condition that may require the University to provide me with reasonable adjustments so that I can successfully carry out the requirements of this position. I acknowledge that:

- Any adjustments I need have been discussed with the University prior to completing this declaration; and
- The University may require me to undergo a medical assessment to determine the nature of any reasonable adjustments that may be made in order to accommodate my condition.

Should specific equipment be required to ensure that I perform my duties in accordance with the Occupational Health and Safety Act 2000, I will notify my direct supervisor prior to commencing duties.

I understand that an assessment of my workplace by the OHS&IS Unit may be necessary and agree to abide by their recommendations.

I am aware that making a false or misleading statement may threaten my appointment or continued employment with the University.

Tick as appropriate)

I will commence duty on

Signed

First Name, Surname

Date

The completed form should be held in each work area and not sent to OH&S unless an ongoing health issue has been identified.

