



## WEC GROUP INTERNAL TRANSFER REQUEST FORM

<b>The first part of this form must be completed by the employee's current line manager</b>		
<b>EMPLOYEE DETAILS</b>		
Employees name:	Current Manager:	
Current position:	Location/ Site:	
Division:	Current hourly rate/ salary:	
Start date in current position:	Reason for transfer:	
<b>EMPLOYEE INTERNAL TRANSFER ELIGIBILITY</b>		
Has the employee passed their probation?	Yes [ ]	No [ ]
Does the employee have any live warnings on file?	Yes [ ]	No [ ]
How many occasions of absence has the employee had in the last 12 months?		
How many periods of lateness has the employee had in the last 12 months?		
How would you rate their skill level out of 10? (10 being excellent)		
If a Welding position, how would you rate their welding/ operating speed out of 10? (10 being excellent)		
<b>Signed by current Manager:</b>	<b>Date:</b>	
<b>Signed by current Director/ Head of Department:</b>	<b>Date:</b>	
<b>Once the above is completed the below must be completed by the employee's new line manager</b>		
<b>NEW POSITION DETAILS</b>		
Position:	Division:	
Location/Site:	Manager name:	
Date effective from:	Hourly rate/ salary:	
Hours- Days/ Nights per week:	Days	Nights
Circle/ highlight days being worked:	Monday Tuesday Wednesday Thursday Friday	
Hours:	Total hours per week:	
Benefits:	Does this employee need:	
Shift Allowance:	Transferring from weekly to monthly pay? Yes [ ] No [ ]	
Attendance Bonus:	A new restrictive covenants issuing? Yes [ ] No [ ]	
<b>Signed by New Manager:</b>	<b>Date:</b>	
<b>Signed by New Director/ Head of Department:</b>	<b>Date:</b>	
<b>Signed by Managing Director:</b>	<b>Date:</b>	
<b>Signed by HR:</b>	<b>Date:</b>	