

Placement and condition details approved placement

FORM 9-059

Send to Secretary of Placements

Title	
Surname	
Christian name(s)	
Partners name (optional)	
Current address	Postcode
Home Phone	
Mobile	
Work (if available)	
Email	
Date Ordained/Recognised/Received	
New address	Postcode
Home Phone	
Mobile	
Work (if available)	
Placement (Congregation/Agency/Church body)	
Placement Title	
Existing Student Priority Placement	
Placements/Presbytery to complete	
ls the Synod required to arrange a removal as per 2.7.4 (K) of the Uniting Church in Australia C	Constitution and Regulations?
Yes No	
Specified Ministry	
Presbytery/Appointing Body	

Terms and Conditions

1. Proposed commencement date of placement

Where the placement relates to a Pastor, list the relevant **General Competencies** for and within the ministry context:

2. Placement percentage

Full time or Part-time

%

3. Stipend

Identify if a stipend margin will apply as a percentage of the stipend.

0% 10% 20% 30%

4. Housing

Select the housing option for this placement:

- A. A manse will be provided
- B. Housing allowance
- C. Placement to rent or buy suitable housing for the minister

Address will be:

Where identified, the following additional conditions will apply in respect of housing.

5. Travelling allowance

Check which is appropriate

Rate number	Kilometers travelled	Allowance per month	Annual allowance
1	Up to 10,000	\$1,007	\$12,084
2	10,000 to 12,500	\$1,080	\$12,960
3	12,500 to 15,000	\$1,148	\$13,776
4	15,000 to 17,500	\$1,225	\$14,700
5	17,500 to 20,000	\$1,305	\$15,660
6	In excess of 20,000	+27 cents / km	+27 cents / km

Where identified, the following additional conditions will apply in respect of travel.
6. Zone allowance and other remote area allowances (if applicable)
Zone Allowance and Remote holiday allowance applies to this placement Yes No
7. Other Conditions
Where identified the following additional conditions will apply to this placement.
8. Placement Approvals
Chairperson Church Council Signature
Date
Name
Email
Phone
Presbytery Minister/Chairperson Signature
Date
Name
Email
Phone
Secretary Placements Committee Signature
Date
Name
Email

Phone