UNIVERSITY OF TASMANIA ADJUNCT, CLINICAL AND ASSOCIATE TITLES  
NOMINATION FORM FOR NEW APPOINTMENTS

1. TITLE CATEGORY – to be completed by the Nominator

Indicate the category of title – check the Adjunct, Clinical and Associate Titles Policy for the intended purpose of each category and the qualifications required

<table>
<thead>
<tr>
<th>Adjunct Professor</th>
<th>Adjunct Senior Lecturer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjunct Associate Professor</td>
<td>Adjunct Lecturer</td>
</tr>
<tr>
<td>Clinical Professor</td>
<td>Adjunct Senior Researcher</td>
</tr>
<tr>
<td>Clinical Associate Professor</td>
<td>Adjunct Researcher</td>
</tr>
<tr>
<td></td>
<td>Clinical Senior Lecturer</td>
</tr>
<tr>
<td></td>
<td>Clinical Lecturer</td>
</tr>
<tr>
<td></td>
<td>University Associate</td>
</tr>
</tbody>
</table>

Approved by Provost
(after consideration by the Adjunct, Clinical and Associate Titles Committee)

Approved by Head of School and Executive Dean (or delegate) or Head of Division
(after College/Division process)

2. NOMINATOR DETAILS - to be completed by the Nominator

Name and title

School/Centre/Section

Mailing address

Email address

Phone extension

3. APPOINTMENT DETAILS - to be completed by the Nominator

Nominee Name and title

College/School/Institute/Division

University Line Manager:

See the Adjunct, Clinical and Associate Titles web page for required nomination materials and processes

Appointment Period: From__________to [circle one] 31 January OR 31 July ___________[year] (max 3 years)

Does this nominee require a visa to participate at University? ☐ Yes ☐ No
If yes, please contact your HR team for advice on process and details of appropriate visas.

Does this nominee require a Working with Children Registration? ☐ Yes ☐ No
If yes, please contact your HR team for advice on process.

APPROVALS

FOR ALL LEVELS
Head of School /Divisional Portfolio Head

Name

Signature

/

/

FOR ALL LECTURERS, RESEARCHERS AND ASSOCIATES
Executive Dean [or delegate] /Head of Division

Name

Signature

/

/

FOR ADJUNCT PROFESSORS/ASSOCIATE PROFESSORS
Executive Dean / Head of Division

Name

Signature

/

/

Please complete and attach this form to the front of the nomination. For queries, please contact the Honorary.Titles.Admin@utas.edu.au

(Version 6: July 2019)
**Resource Requirements**

**Use of University/College/School Resources - Please tick one or more as appropriate:**

(University email account to be used for all communication between the University and the appointee. It is the responsibility of the appointee to redirect emails)

- [ ] None – located off site
- [ ] Regular – Office space only
- [ ] Regular – Office and High Risk Activity
- [ ] Minimal – building and/internet/Library access only
- [x] Other ________________

**Primary Reason for Appointment**  
Please tick relevant primary reason for the appointment and if needed, attach additional information

<table>
<thead>
<tr>
<th>Reason</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PhD supervision</td>
<td>(provide candidate(s) name and project number/title)</td>
</tr>
<tr>
<td>Individual research projects and publications</td>
<td>(provide detailed plan)</td>
</tr>
<tr>
<td>Emeritus, Adjunct and Clinical Professors and Associate Professors</td>
<td>(provide detailed justification)</td>
</tr>
<tr>
<td>Project collaboration</td>
<td>(provide project number/title(s) and brief description)</td>
</tr>
<tr>
<td>Strategic opportunity / capacity building</td>
<td>(provide detailed justification)</td>
</tr>
<tr>
<td>Other</td>
<td>(provide details)</td>
</tr>
</tbody>
</table>

**Area**

**Planned activities during proposed appointment period**

<table>
<thead>
<tr>
<th>Area</th>
<th>Personal Contribution</th>
<th>Deliverables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants and consultancies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Publications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HDR Supervision</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Services</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Insert additional information to support the activities here:

**Risk assessment**

<table>
<thead>
<tr>
<th>Low Risk Activities</th>
<th>Please tick activity type</th>
<th>WHS Induction Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offsite/National/International Collaborator</td>
<td>[ ]</td>
<td>None, unless arrives on site.</td>
</tr>
<tr>
<td>Desk based, office based/classroom based activities with no high risk activities. If you are not sure, please check with your WHS Advisor.</td>
<td>[ ]</td>
<td>Local Area Induction required on commencement.</td>
</tr>
<tr>
<td>Supervision of post grad students</td>
<td>[ ]</td>
<td>Local Area Induction and may include Research Supervision Training by ORS on commencement.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>High Risk Activities</th>
<th>Please tick activity type</th>
<th>WHS Induction Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laboratory/workshop/studio</td>
<td>[ ]</td>
<td>Local Area High Risk Induction</td>
</tr>
<tr>
<td>Field work</td>
<td>[ ]</td>
<td>Local Area High Risk Induction</td>
</tr>
<tr>
<td>Boating/Diving</td>
<td>[ ]</td>
<td>Local Area High Risk Induction</td>
</tr>
<tr>
<td>Activities involving driving, machinery or plant operation</td>
<td>[ ]</td>
<td>Local Area High Risk Induction</td>
</tr>
<tr>
<td>Use of Chemicals, hazardous materials etc.</td>
<td>[ ]</td>
<td>Local Area High Risk Induction</td>
</tr>
<tr>
<td>Biosafety / Animal Handling</td>
<td>[ ]</td>
<td>Local Area High Risk Induction</td>
</tr>
<tr>
<td>Other (please detail)</td>
<td>[ ]</td>
<td>Local Area High Risk Induction</td>
</tr>
</tbody>
</table>

If from the above assessment, the activities are deemed greater than low risk, a formal risk assessment is required to be undertaken before commencement and in accordance with the University’s Risk Management Policy and Matrix and include appropriate risk controls to eliminate or minimise the risk so far as is reasonably practicable. Further information about WHS Induction and Training can be found here.  

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Please complete and attach this form to the front of the nomination. For queries, please contact the Honorary.Titles.Admin@utas.edu.au

(Version 6: July 2019)
4. TITLE HOLDER DETAILS (to be completed by the Nominee)

Name and title

Gender: __Female __Male ___X (Indeterminate/Intersex/Unspecified)  Date of birth________

Organisation/Institution

Mailing address

Telephone No. ___________________________ Email address ___________________________

Emergency Contact (Name)_________________________________________ Telephone No. ___________________________

Please read and note the Work Health and Safety Information in the next section.

1. Medical Disclosure

Given the description of the contribution being made under this appointment  Yes  No

• do you have a pre-existing medical condition or injury that would preclude you from carrying out some or all of the duties of the position?  

• are you taking any medication that could affect your health and safety or that of others, whilst undertaking this appointment?  

If YES, please provide details of the condition: _________________________________________________________________

Approach your nominator to undertake a risk assessment to identify if there are reasonably practical controls available to the University to manage the identified risks to an acceptable level. (Seek WHS Advisor support if required)

Is specialist medical or insurance advice required?  

Comment: _____________________________________________________

2. DECLARATION

I acknowledge that I have read and understand this document in relation to work in authorised activities on behalf of the University of Tasmania. I undertake to advise the Organisational Unit head should circumstances change during my appointment that would alter the responses provided above.

I have completed the sections of the document relevant to me and I declare that to the best of my knowledge the information given by me is complete and true.

Name: ……………………………………………………………. Signature: ……………………………………………….. Date: ……. /……../………

(Position holder)

Please attach the following documents to the end of this nomination form (refer 3.1 Nomination Materials – Adjunct, Clinical and Associate Titles Procedure):

• Supporting rationale for the conferral from the Head
• Nominee’s current curriculum vitae (a brief copy – 5 pages or web hyperlink)
• Supporting statement of tangible outcomes where the nominee has previously held an adjunct, clinical, associate or equivalent title with the University of Tasmania
Work Health and Safety Information (for the nominee)

a) Work Health and Safety
The nominee is a volunteer ‘worker’ for the purposes of the Work Health and Safety Act 2012. In accordance with the Work Health and Safety Act 2012, a person undertaking a role with the University is to comply with Section 28 of the Act and while at work must:
   a) take reasonable care for his or her own health and safety; and
   b) take reasonable care that his or her acts or omissions do not adversely affect the health and safety of other persons; and
   c) comply, so far as the worker is reasonably able, with any reasonable instruction that is given by the University to allow the University to comply with this Act; and
   d) co-operate with any reasonable policy or procedure of the University relating to health or safety at the workplace that has been notified to workers. Please find access to the University Work Health and Safety policies and delegations here.

b) Accidents and Injuries
If a person occupying a position is injured, or has an accident during the carrying out of their duties, they must report it immediately using the online Incident Reporting system or to their Organisational Unit head or delegate.

c) Insurance
As the position holder is not an employee of the University of Tasmania they are not covered by Workers’ Compensation insurance. However, they are covered under the University’s Personal Accident Insurance Policy for injuries sustained whilst engaged in authorised activities (Noting an age limit of 80 years and general policy exclusions apply). Refer to the University of Tasmania Insurance Guidelines for further details of insurance information.

Important Notice:
In accordance with the Private Health Insurance Act 2007 the Personal Accident Insurance policy cannot and is not allowed to pay expenses incurred for which a Medicare benefit is payable. The policy will not pay for any doctor or hospital bills or any other medical accounts that have a Medicare benefit. The policy will not pay for any balance of monies due or payable after deduction of any Medicare benefit, commonly referred to as the “Medicare Gap”.
For driving, note that if the volunteer is using a private vehicle, then authorisation for use is required from the Organisational Unit Head or delegate and the University’s Personal Accident Insurance Policy may not cover him/her. Refer to the UTAS Insurance Guidelines on the Policy & Delegations website for further policy details:

d) General Conditions relating to positions
As the holder of an affiliate position with the University, a person:
   • will not receive any remuneration for affiliate work;
   • must not sub-contract work to any other person;
   • must obey all reasonable requests made by the Organisational Unit head or Delegate and if a dispute arises, should discuss the issue with the Organisational Unit head or Delegate;
   • must comply with all security and office regulations in place at the University;
   • shall not represent themselves as employees of the University of Tasmania.
The University of Tasmania may terminate affiliate appointments at its sole discretion.

e) Medical Disclosure
The University is to be advised of:
   • any pre-existing medical condition or injury that would preclude the person from carrying out all of the duties of the position;
   • any medication that could affect the person’s health and safety or those of others, or the undertaking of their duties.
Note: Completion of Medical Disclosure and Authorisation Forms will be required where participating in: laboratory, workshop, or studio work; field activities; or undertaking required driving.