

## Notification of deployment with the Rapid Response Corps – HR Form 116 (b) *HSE HR Circular 17/2008*

Please complete in Block Capitals/Tick appropriate boxes

Employee Details																							
Surname	First Name																						
Grade	Personnel Number																						
Location	PPS Number																						
Position Name	Position Number																						
I have been selected for deployment with the Rapid Response Corps.																							
Deployment details																							
To be deployed to the position of																							
With the following partner Agency																							
Country of Deployment																							
The deployment will be for a period up to three months from																							
Supporting documentation from Irish Aid / Partner Agency is attached									Yes	<input type="checkbox"/>	No	<input type="checkbox"/>											
Employee Declaration																							
I declare that the above information is accurate and correct on the date below. I undertake to notify my employer of any changes to this information.																							
Signature	Date																						
Leave details																							
Special leave with pay is granted for a <b>MAXIMUM</b> period of three months																							
From													To*										
Line Manager Declaration																							
I declare that the above information is accurate and correct on the date below.																							
* Note this date represents the maximum period that such paid leave can be granted – if the employee returns before this date I undertake to advise Human Resources & Payroll of the revised end date of this leave.																							
Name (Capitals)	Grade																						
Signature	Date																						
Contact Phone No:	Mobile No:																						
E-mail Address																							

If Faxing please ensure the employee's Name and Personnel Number are included for each page of form

Name \_\_\_\_\_ Personnel No. \_\_\_\_\_

**To be completed by Human Resources, Personnel Administration**

System Updated by (Print Name)

Signature	Date									
-----------	------	--	--	--	--	--	--	--	--	--

Comments

**Payroll Section To be completed on return to duty or expiry of leave**

Total Salary paid during leave period	€
---------------------------------------	---

Total Fixed <sup>1</sup> Allowances paid during leave period	€
--	---

Employers Superannuation costs during period of leave	€
---	---

Employers Social Welfare costs during period of leave	€
---	---

Total Cost to be refunded from Irish Aid (Vote 29 for overseas development aid)	€
---	---

Name (Print)	Signature
--------------	-----------

Tel No	Date									
--------	------	--	--	--	--	--	--	--	--	--

\_\_\_\_\_

<sup>1</sup> This figure is to include only those allowances that would normally be included with basic pay and should not include premium payments such as unsocial hours, overtime etc