

Please enter your basic hours of work in the table below and return to your Medical HR Adviser by email at least eight weeks before your start date. Please include your expected percentage of work.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Monday** | **Tuesday** | **Wednesday** | | **Thursday** | **Friday** |
| ***Example 08:00-17:00*** | ***00:00*** | ***Example 08:00-17:00*** | | ***00:00*** | ***Example 08:00-17:00*** |
|  |  |  | |  |  |
| **LTFT Percentage** | | | *(50/60/70/80/90)* **%** | | |