

RELOCATION CONTROL RECORD

The collection, use and disclosure of personal information is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*.

INSTRUCTIONS: This form can be retained by the ministry as a control record for every relocation. Please print clearly.

EMPLOYEE SURNAME AND INITIALS			COMPETITION NUMBER		EMPLOYEE NUMBER		EFFECTIVE DATE (YYYY MMM DD)		
MOVING FROM MINISTRY			CITY LOCATION		MOVING TO MINISTRY			CITY LOCATION	
POSITION TITLE			CLASSIFICATION		POSITION TITLE			CLASSIFICATION	
INVOICE NUMBER	DATE RECORDED YYYY MMM DD	TRAVEL EXPENSES	INCIDENTAL EXPENSES	MISCELLANEOUS EXPENSES	COMMENTS				
					Sample				
		\$ 0.00	\$ 0.00	\$ 0.00					GRAND TOTAL

To ensure proper functionality of the form, please enter \$0 for any expenses that are nil.