



West Midlands Police

FEDERATION/UNION REPRESENTATIVE

Notification of Actual Duties

OCU: _____ Name: _____ Collar No: _____ Month/Year: _____

Date	Commitment during Duty Time (yes/no)	Brief Details of Duties (<i>insert code as below and any other additional relevant information – avoid personal details</i>)	Time Committed
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
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25			
26			
27			
28			
29			
30			
31			

Duties:

- | | | | |
|-----------|----------------------------|----|--|
| SM | Statutory National Meeting | WD | Welfare – Discipline |
| FM | Force Meeting | WG | Working Group |
| LM | Local Meeting | WS | Welfare – Sickness |
| T | Training | WO | Welfare – Other (<i>please provide additional brief details</i>) |

I confirm that the details above are correct.

Signed: _____ Date: _____

THIS FORM SHOULD BE FORWARDED TO YOUR LOCAL PERSONNEL MANAGER NO LATER THAN TWO WEEKS AFTER THE END OF THE CALENDAR MONTH