

PSC Mutually Agreed Resignation Scheme (MARS) Application Form

For Completion by the employee.

Department / Board /Office & Division			
Full Name:		Date of Birth:	
Job Title:		Skill Zone / Grade:	
Payroll Number:			
NI Number:		Gross Basic Annual Salary	
PSC Civil Service / PSC Manual and Craft Start Date:		Department Start Date:	
Preferred Contact Details:	Email:		
	Phone:		
	Address		
I wish to apply for Mutually Agreed Resignation. I understand that the information above will be validated and the outcome of my application will be communicated to me in writing.			
Date:	Signed:		

For completion by the Line Manager / Divisional Head

Details required of how recurrent cost savings can be made through skill mix / redeployment:
1. Should the employee be considered for mutually agreed resignation? If so, on what basis?
2. Savings to be delivered as a result of agreeing a MARS payment? (recurrent and non-recurrent)
3. Mutually Agreed Resignations Costs
4. Does the application create an opportunity for another displaced member of staff?

I do / do not* support this application (*Delete as appropriate)	Reason:
Signed: Print Name:	Line Manager
Signed: Print Name:	Divisional Head
Date:	

Authorisation from Chief Executive Officer (or Delegate)

This application is / is not supported.

Signed:

Date:

For completion by HR / Payroll Team

Basic Annual Salary:		Organisation Start Date:	
Mars Payment Calculation:	Leaving Date:		Completed Years:
Completed by: _____			
Date: _____			

MARS Panel Decision:

The application has / has not been approved

Reasons for Decision

Signed (on behalf of MARS Panel):

Date: