

Forms: Acting & Allowance authorization

Name and personnel number of acting employee:			
Level difference between original and acting position:			
Current position of employee		Acting position:	
Amount of acting allowance to be paid per month.			N\$
Duration of acting allowance (maximum 3 months / minimum one week – enter dates)	dd/mm/yyyy	To	dd/mm/yyyy
Reason for acting allowance:			
Acting allowances are paid subject to the following conditions as confirmed by both the manager and acting employee:			
<ol style="list-style-type: none"> 1. That the acting employee is fulfilling duties on a permanent basis, for a fixed period of time, at a higher graded position. 2. That the acting employee is capable and was trained to fulfill these duties at a higher level. 3. That the manager is responsible to ensure that an acting employee is in possession of a development plan which will indicate the short comings and development initiatives planned in order for the acting employee to permanently take up such an acting position should such position become permanent in future – subject to points 4, 5, & 6 below. 4. An acting employee will meet the minimum entry requirements for the position that s/he is fulfilling and will have the potential to be appointed permanently in future in the acting position. 5. That any acting duty does not constitute however any commitment for a person to be appointed in an acting position should the position become vacant over time. 6. The employee specifically agree that no commitment is made or expectation created for future employment in an acting position and that any such appointment will be subject to the employer's recruitment policy. 			
<i>Confirming the above to be correct and both the employee and manager fully understanding (and agreeing to) the conditions as stipulated herein.</i>			
Signed: Authority level 1		Date:	dd/mm/yyyy
Signed: Authority level 2		Date:	dd/mm/yyyy
Signed: Acting Employee		Date:	dd/mm/yyyy
Signed: Authority level 3		Date:	dd/mm/yyyy