**APPENDIX 1**

**HR Circular 068/2020: Confirmation in Post of Temporary Higher Appointment\***

**\*Clerical Administration Management above Grade VII and Consultants excluded.**

**Name of Postholder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Personnel No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title of Post: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade of Post**:**\_\_\_\_\_\_\_\_\_\_**

**WTE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Commencement of Employee in Temporary Higher Appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# Validation Checklist

|  |  |  |
| --- | --- | --- |
|  | ***Document Verified*** ***on file*** | ***Confirm*** |
| 1. Post holder held post on a temporary higher appointment basis continuously since the first appointment date.
 | Initial and continuation approval docs to current date | Yes  |
| 1. Post holder appointed to a temporary higher appointment on or prior to 1st January 2019.
 | Included above | Yes  |
| 1. Post holder has been paid at the rate for the higher appointment.
 |  | Yes  |
| 1. Post holder held a permanent contract in their substantive post immediately prior to their temporary higher appointment.
 | Permanent substantive contract | Yes  |
| 1. Post holder continues to hold the post.
 | Included above | Yes  |

**CONFIRMATION BY SENIOR MANAGER WITH LINE MANAGEMENT FOR THIS POST**

(Hospital General Manager, Head of Service; For Corporate divisions, Asst. Nat. Director)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Signed Date***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**NAME & TITLE** *(Please Print)*

**CONFIRMATION BY HUMAN RESOURCES MANAGER (Grade VIII or above)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Signed Date***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**NAME & TITLE *(Please Print)***