

## APPOINTMENT AGAINST ACADEMIC LEAVE FUNDING

Please take note of the following information and then supply the required details in order to facilitate the appointment of a temporary lecturer:

- 1. This form should be used for all requests for appointment of staff against Academic Leave Funding
- 2. Academic leave funding is approved a year in advance as part of the Academic Leave budgeting process. In other words, in order to qualify for funding in respect of academic leave in a particular year, confirmation of the allocation of funding would have been sent to the Head of Department upon finalisation of the budget in the previous year.
- 3. If you are unsure as to what funding was made available in respect of Academic Leave, you may contact your HR Generalist for this information;
- 4. A copy of the individual's **ID/passport** needs to be submitted together with the **Updated CV**.
- 5. If the person who is to be appointed is a <u>FOREIGN NATIONAL</u> the visitor will need to be in possession of a <u>WORK PERMIT</u> <u>before ANY WORK can be done</u>! Please refer to the guidelines for employing foreign nationals at: <u>http://www.ru.ac.za/humanresources/academicstaffmatters/forthehod/temporaryteaching</u> In terms of the Department of Labour requirements, foreign nationals on a study permit may not work in excess of 20 hours a week during the term. Please ensure that the University is found to be compliant in this regard. When requesting payment for the foreign visitor, please submit the documentation referred to in point 3 above, including copies of the work permit endorsed in the passport.
- 6. The **payroll deadline dates** need to be observed in requesting payments against Academic Leave funds;
- 7. New lecturers will be required to attend the New Lecturer's Orientation that is facilitated by the Centre for Higher Education Research, Teaching & Learning (CHERTL) at the beginning of the year.
- 8. Please give the HR Division at least five working days to process all requests for appointments; and
- 9. Please contact the HR Generalist dealing with your Department for all your queries or requests.

Name of department	
Name of academic/s who will proceed on academic leave, against which this appointment should be made	
Name and title of person you would like to appoint against the academic leave	
Contact details of individual (address and telephone numbers)	
Is the person a foreign national? See pt 5 above.	
Previous RU Employee Number and/or Current RU Student Number [if applicable]	
Please indicate employee number if already a permanent staff member at R U?	
Please indicate if the individual has another employment contract/s within Rhodes University and the total hours worked per month	
Working Hours: Activities of appointment e.g. courses to be taught, lectures to be given, practicals to be run. Please be specific about the number or amount of hours this involves, checking that this ties in with the budget application or explaining deviations from this.	
Start Date and End Date of Contract	
Given the number of hours worked, indicate what the appointee should be paid, in terms of budgeted rates.	

Total remuneration (In terms of the letter of approval sent to the Department)				
t	Monthly remuneration			
nər	Once-off payment			
Payment Options	Payment of Travel, Subsistence & Accommodation			
	Honorarium			
Is this person at all likely to make use of transit				
accommodation?				

## **Employment Equity: For completion by the HOD:**

Recommendation for appointment: in line with the employment equity initiatives and strategies of the University, have you sought to appoint a <u>Black</u> candidate?	YES, but I have been unable to find anyone suitable. Please outline what has been done in this regard:	YES, a recommendation has been made in line with this.
Where you have been unable to appoint a Black candidate, have you sought to appoint a candidate from <u>other designated groups</u> ?	YES, but I have been unable to find anyone suitable. Please outline what has been done in this regard:	YES, a recommendation has been made in line with this.

Any other considerations	5				
Please sign:	HOD NAI	/IE:HOD SIGNATURE:	Date:		
		For HR Office Use Only – To Be Completed by the H	R Generalist I		
Job Title		New or Existing Posit [Yes/No]	ion		
If Existing, Indicate Position Code as per VIP		Full Cost Centre Number			
I declare that the above information in this application/ request has been carefully assessed and it is correct.					
Signature of H Generalist I	R	Date:			

Form revised 01 June 2012