

## **ACTING AGREEMENT**

Checke	ed by:	
Signatu	ıre:	
	Process	Declin
Reason D	eclined:	

entered into between

## Montego Pet Nutrition

(from now on referred to as "the Organisation")

	and	d th	ne following e	mploye	ee:						
Name & Surname:				Employee Numb			umber:				
Designation:				Depa	rtment:						
	(from now on I	ref	erred to as "th	ne Acti	ng Employee"	)					
The Acting Employee I	nas volunteered to perfo	rm	acting duties	for the	e following:						
Role of:				Depa	rtment:						
Date(s) acting in the role:	1.	2.		3.				4.			
	5.	6.			7.		8.				
	9.	10.			11.		12.				
	13.	14.			15.		16.		).		
	17.	18.			19.		Total Days:				
	_				1						
Danier fan Aatin ein	Motivation to be a	con	npleted by th		-			A			
Reason for Acting in	Reason for Acting in the position:			Absent Employee				App	rovea	Vacancy	
Name of Absent Emp	oloyee:										
	vee complete 100% of the				and shift?		<u> </u>	YES		NO	
I confirm that the employee is acting in a "higher leve			er level" posi	position			]	YES		NO	
Notes:											
				15.1	I coth c						
	All Claim Forms must b	e s	submitted to I	HR by t	the 20" of ea	ch	month.				
<ol> <li>Perform all dutie</li> <li>Acknowledges to acting position is</li> <li>Assume response</li> </ol>	nployee undertakes the facts associated with the act hat this is a voluntary and expected. Sibility for the full range of aployee will be paid an A	tined te	g role. emporary arro uties of the po	osition	in which they	ac	ct.	ent ap	pointm	ent to the	
SIGNATURE: EMPLOYEE  I confirm that the above is true and correct				SIGNATURE: SUPERVISOR / MANAGER I confirm that the above is true and correct							
DATE:			L	Λ T E ·							

