

# PERMANENT APPOINTMENT REPORT

**NOTE:** This form is to be used in accordance with sections 23 and 25 of the *Public Service Act* and section 2.6.1 of Chapter 2 and section 2.9 of Chapter 3 of this Manual for the permanent appointment of a staff member who has been acting in a higher post for at least 6 months. **A copy of the job description for the acting post and a financial visa is to be attached to this form.**

The information in this form shall be used by the Commission to assist in satisfying itself that merit and equity criteria have been satisfied.

**Staff Members Name:** \_\_\_\_\_

**Staff Members Substantive Position:** \_\_\_\_\_ **Post Number:** \_\_\_\_\_ **Level:** \_\_\_\_\_

**Staff Members Acting Position:** \_\_\_\_\_ **Post Number:** \_\_\_\_\_ **Level:** \_\_\_\_\_

**Employment Status: Officer/Daily Rated Worker/Temporary Salaried Employee**

(Please circle relevant status)

**Period the staff member has been Acting in the Position - FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**Does the staff member have the Required Qualifications (as per the job description)** \_\_\_\_\_

**What languages, other than Bislama, does the staff member speak:** \_\_\_\_\_

**What is the staff members Island of Origin:** \_\_\_\_\_

**Is the staff member Male or Female:** \_\_\_\_\_

**Why was the staff member selected to Act in the Post:** *Please attach report setting out reasons.*

**How has the staff member performed during their time in the Acting Position:** *Please attach a report on the officer's performance during the acting period.*

**In your opinion, is the staff member sufficiently experienced to occupy the position on a permanent basis:**  
\_\_\_\_\_

**Are there any other staff within the Ministry below the level of the grade of the acting post who would be capable of performing the duties of the position:** \_\_\_\_\_

**I recommend the staff member be appointed to the Position on a permanent basis**

\_\_\_\_\_  
**Signature of Director** **Date:** \_\_\_\_\_

\_\_\_\_\_  
**Date:** \_\_\_\_\_

**Signature of Director-General**

**Public Service Commission Decision:**

**Approved/Not Approved at PSC Meeting No:** \_\_\_\_\_ **Held on:** \_\_\_\_\_

**Date Director-General Advised of Decision:** \_\_\_\_\_

**Date Letter of Appointment issued to staff member (if approved by Commission):** \_\_\_\_\_