

# PANEL MEMBER ALLOWANCE APPLICATION FORM

Name of Officer: \_\_\_\_\_ Payroll No: \_\_\_\_\_

Post Title: \_\_\_\_\_ Post Level: \_\_\_\_\_

Post Number: \_\_\_\_\_

Department/Ministry \_\_\_\_\_

Indicate in the box below by ticking the appropriate type of panel you have been appointed to:

Type of Panel	
Investigation/Inquiry	
Recruitment Selection	
Other (Please specify)	

Describe the task(s) you have been appointed to carry out [Please attach a copy of your appointment letter and copy of Terms of Reference (if any)]:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify that I had done my part as a panel member to complete the task allocated to me and had submitted a report and/or relevant papers to the Department/Ministry/Authority concerned.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

I recommend that the Officer should receive a Panel Member allowance of VT. \_\_\_\_\_ in addition to his/her substantive salary for the work done.  
(The appropriate amount is found in the Allowance and Additional Payments Table PSC Table 4-2)

Director - Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of Department: \_\_\_\_\_ Date: \_\_\_\_\_

**I endorse the Directors recommendation.**

**Director-General - Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Name of Ministry:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TO BE COMPLETED BY THE SECRETARY, OPSC**

**APPROVED: YES or NO** (Please circle decision of PSC)

**Date of PSC Meeting:** \_\_\_\_\_

**Secretary - Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

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