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**Human Resources Office**

Chyngyz Shamshiev\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President/ Chief Operating Officer

 Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Assigning Additional Responsibilities**

**(Administrative Offices)**

Kindly ask you to assign additional responsibilities \_\_\_ rate of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the period \_\_\_\_\_\_\_\_\_\_

 *Name of the position Employee’s name*

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Position** | **Office / Program** | **Period** | **Grant(s) name\*** | **Budget line** | **Budget sub-line** | **Salary per month, KGS****Gross** | **17,25%** | **Total** | **Total per period** |
| *To be filled in by Finance Office* |
|  |  |  |  |  |  |  |  |  |  |  |

**Employee’s signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |
| --- |
| **Initiator:Head of Administrative Offices, Grant’s Coordinator** |
|  **Name** | **Position** | **Signature** | **Date** |
|  |  |  |  |

|  |
| --- |
| **Approved by Direct Supervisor** |
| **Name** | **Position** | **Signature** | **Date** |
|  |  |  |  |

**Received by:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **№** | **Name** | **Position** | **Signature** | **Date** |
| 1. |  | HR Coordinator |  |  |

**Approved by:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **№** | **Name** | **Position** | **Signature** | **Date** |
|  |  | Deputy Financial Director /Chief Accountant |  |  |
|  |  | Financial Director / Financial Analyst |  |  |
|  |  | Grants Office Specialist (if expenses are covered by grant)\* |  |  |
|  |  | Grants Financial analyst (if expenses are covered by grant)\* |  |  |
|  |  | Director of Grants Coordination Office (if expenses are covered by grant)\* |  |  |
|  |  | HR Director |  |  |