

Short-term Temporary Assignment

Employee Name: _____ Employee ID: _____

Department: _____ Division: _____

Assigned:

From Position: _____ Salary Scale: _____

To Position: _____ Salary Scale: _____

Commenced Assignment: Time: _____ Date: _____
(mm/dd/yyyy)

Assignment Ceased: Time: _____ Date: _____
(mm/dd/yyyy)

Total Number of hours: _____

Reason for Action: _____

Employee due Wage Differential: Yes No

Subordinate's Name: _____ Subordinate's ID: _____

Supervisor's Signature: _____ Date: _____
(mm/dd/yyyy)

Deputy Minister's/Delegate Signature: _____ Date: _____
(mm/dd/yyyy)

To be completed by Compensation and Benefits:

Temporary Assignment Regular Pay:

From Salary Grade: _____ Step: _____ Pay Rate: _____

To Salary Grade: _____ Step: _____ Pay Rate: _____

Difference: \$ _____ x No of hours/days _____ = **Pay Owing** _____

Temporary Assignment Wage Differential Pay:

Subordinate's Salary Grade: _____ Step: _____ Pay Rate: _____

Difference: \$ _____ x No of hours/days _____ = **Pay Owing** _____

Comments: _____

Payroll Specialist Signature: _____ **Paid On:** _____

Under the authority of the **Financial Administration Act**, personal information will be collected for the purpose of processing requests. Your personal information is protected by the Access to Information and Protection of Privacy Act and will not be disclosed without consent or authorization. Any questions or comments can be directed to the Compensation and Benefits Service Centre Specialists at 729-7690, 1-888-729-7690 or CompensationBenefits@gov.nl.ca.

Short-term Temporary Assignment (HRS-110) Instructions

The Short-term Temporary Assignment form (HRS-110) is to be completed for short-term temporary assignments, required to meet operational demands that do not exceed two (2) weeks duration (the equivalent of the number of hours in the employee's standard bi-weekly work week).

The name and salary scale (e.g. Clerk IV; GS) of the employee's current position and the position he/she is temporarily assigned to must be recorded on the form along with the start and end time, date and number of hours of the temporary assignment. As well, it must be indicated if the employee is owed wage differential on the short-term temporary assignment and if so the subordinate's name and ID must be recorded. Compensation and Benefits will determine the temporary assignment pay and wage differential owed to the employee.

The form should be completed and signed by the employee's supervisor and forwarded to the Deputy Minister or delegate (authorized Signing Officer) for payment approval. Completed and signed forms where possible should be scanned and emailed to Compensation and Benefits at TimeLabour@gov.nl.ca. Forms should be forwarded for processing by Compensation and Benefits cut off dates (schedule can be found <http://www.intranet.gov.nl.ca/docs/cab.asp>). Please note that while Compensation and Benefits work to honour deadlines, we ask that you submit your information as early as possible to avoid high volume of submissions on deadline days. High submission volumes may lead to delays in processing. Forms received after cut off will not be processed until the following pay period. Incorrectly completed forms will be returned for correction prior to processing and could result in delays.

A copy of this form can be found on the Public Service Network site (<http://www.intranet.gov.nl.ca/docs/default.asp>) or by contacting the Compensation and Benefits Service Centre. Any questions in completing this form can be directed to the Compensation and Benefits Service Centre.

Contact Information:

Compensation and Benefits Service Centre

E-mail: CompensationBenefits@gov.nl.ca

Phone: 729-7690 or 1-888-729-7690

Time and Labour E-mail: TimeLabour@gov.nl.ca

Mailing address:

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