[Date]

[Employee Name]
[Employee ID]
[Department]

Subject: Extension of Temporary Acting Role and Pay Adjustment

Dear [Employee Name],

This letter serves to formally confirm the extension of your temporary appointment as [Acting Job Title].

Your assignment in this acting capacity, which began on [Original Start Date], is now extended until [New End Date], or until the position is filled on a permanent basis.

In recognition of these additional responsibilities, your temporary acting pay adjustment of [Amount/Percentage] will continue for the duration of this extension. Your total gross salary during this period will remain [Total Salary Amount].

All other terms and conditions regarding this temporary assignment remain as previously outlined. Upon the conclusion of this assignment, you will return to your substantive position of [Original Job Title] and your salary will revert to your standard base rate.

Thank you for your continued commitment and for stepping up to support the team during this time.

Sincerely,

[Manager Name]
[Title]
[Company Name]

Employee Acceptance:

I accept the extension of the temporary acting role and the associated pay adjustment under the terms described above.

Signature: _____ Date: _____