Date: [Insert Date]

To: [Employee Name]
Employee ID: [Insert ID]

Subject: Notification of Temporary Acting Role and Pay Adjustment

Dear [Employee Name],

This letter confirms your temporary appointment to the position of [Acting Job Title] within the [Department Name]. This acting assignment is scheduled to begin on [Start Date] and is expected to conclude on or about [End Date].

During this period, you will be responsible for the duties and responsibilities associated with this higher-level role. In recognition of these additional responsibilities, your compensation will be adjusted as follows:

- **Current Salary/Rate:** [Amount]
- **Acting Allowance/Adjustment:** [Amount or Percentage]
- **Temporary Total Salary/Rate:** [Amount]

This pay adjustment is temporary. At the conclusion of this assignment, your compensation will revert to your substantive rate of [Original Amount], and you will return to your permanent position as [Original Job Title].

All other terms and conditions of your employment remain unchanged. We appreciate your willingness to step into this role and support the team during this period.

Please sign below to acknowledge your acceptance of these temporary terms.

Sincerely,

[Manager Name]
[Title]

Acknowledgment:

_____
[Employee Signature]

_____
[Date]