[Current Date]

[Employee Name]
[Employee ID]
[Department]

Subject: Notification of Temporary Pay Adjustment for Acting Role

Dear [Employee Name],

Following our recent discussion, I am pleased to formally confirm your appointment to the acting role of [Acting Job Title] to provide maternity leave cover for [Absent Employee Name].

This temporary assignment will begin on [Start Date] and is expected to continue until [End Date], or until the permanent post-holder returns to duty.

In recognition of the increased responsibilities associated with this role, your salary will be adjusted as follows:

- **Current Base Salary:** [Amount]
- **Acting Allowance/New Temporary Salary:** [Amount]
- **Effective Date of Change:** [Date]

At the conclusion of this acting period, your salary will revert to your substantive rate of [Original Salary Amount], plus any intervening annual increments or cost-of-living adjustments that may have occurred.

All other terms and conditions of your employment contract remain unchanged. We appreciate your willingness to step into this role and look forward to your contributions during this period.

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

Sincerely,

[Manager Name]
[Title]

Acknowledgment:

I accept the temporary acting role and the associated pay adjustment as outlined above.

Signature: _____ Date: _____