

## **TURKS AND CAICOS ISLANDS GOVERNMENT**

## SALARY ADVANCE REQUEST FORM

**Instructions:** A request for a salary advance should only be made in cases to alleviate serious and unforeseeable financial hardship on your next pay. Please fill out the information below and submit through your Head of Department.

EMPLOYEE REQUEST:		
Employee Status: (check one)	☐ Confirmed Employee ☐ Co	ntract Employee
Employee Name:	Employee ID	
Department:	Position Held:	
REASON FOR SALARY ADVANCE  Please explain your reason for requesting a salary advance and attach documentation to support your request.		
Salary Advance Requested: \$	Present Monthly Gro	ss Salary: \$
I hereby request a salary advance in the amount stated above. I have read and understand the Staff Advance Policy, January 2014 and I agree that any advance made to me will be applied for the purpose state above and repaid in accordance with instructions in the Staff Advance Policy. My signature below indicates approval for the Government to withhold the full amount of this salary advance in equal monthly installments of \$ from my pay.  I certify that there is no outstanding debt due Government.		
Employe	ee Signature	 Date
REVIEW AND APPROVAL	o dignature	Date
Endorsed Not Endorsed	Comments:	
	Deputy Governor / PS / HOD	Date
Eligible Not Eligible	Comments:	
	Human Resource Director	Date
☐ Approved ☐ Not Approved	Comments:	
	Accountant General	Date
	****** NOTICE ******	

The Treasury Department cannot issue a payment in the current financial year and make deduction(s) in another. Any requests for salary advances received between the date of the last salary payment in a financial year and the beginning of the next financial year shall not be honoured.