



AAN / TO: SAOU WERKPLEKVERTEENWOORDIGER / SAOU SHOP STEWARDS

AANDAG: ATTENTION: ALLE SAOU LEDE / ALL SAOU MEMBERS

Nuusbrief 34 van 2017 / Newsletter 34 of 2017

-DRINGEND-

Omskakeling na permanent

Omskakelings van opvoeders wat tot **1 November 2016** aangestel was, is feitlik afgehandel. Daar kan nog enkele prosesse wees wat op Persal afgehandel moet word.

SAOU het vandag kennis gekry dat die proses van omskakeling na permanent **t.o.v. aanstellings vanaf 1 Desember 2016** 'n aanvang geneem het.

Skoolbeheerliggame sal nou in kennis gestel word om die **aanbevelingsvorme te voltooi** en in te stuur na die onderskeie distrikte.

Skoolhoofde kan die proses vergemaklik deur **gesertifiseerde afskrifte van die onderstaande dokumente aan te heg** by die aanbevelingsvorme **(aangeheg)**:

- **Bewys van professionele onderwyskwalifikasie.**
- **Afskrif van die ID dokument**
- **Afskrif van die SARO sertifikaat**

-URGENT-

Conversion to permanent

Conversions of educators appointed up to **1 November 2016**, are almost done. There may still be a few processes to conclude on Persal.

SAOU received an indication today that the conversion process regarding **appointments from 1 December 2016** has started.

School governing bodies will now be notified to **complete the recommendation forms** which must be submitted to the respective districts after completion.

Principals can simplify the process by attaching **certified copies of the documents below** to the recommendation forms **(attached)**:

- **Proof of professional education qualification**
- **Copy of the ID document**
- **Copy of the SACE certificate**



CONVERSION OF TEMPORARY EDUCATORS TO PERMANENT POSTS IN TERMS OF SECTION 6B OF THE EMPLOYMENT OF EDUCATORS ACT, 1998. FS DEPARTMENT OF EDUCATION

DISTRICT: _____

SCHOOL: _____

NAME OF TEMPORARY EDUCATOR: _____

PERSAL NO: _____

ID NO: _____

DATE EMPLOYED: _____

QUALIFICATIONS: _____

PRESENT SUBJECT(S) AND GRADES TAUGHT: _____

CONVERSION TO PERMANENT RECOMMENDED / NOT RECOMMENDED (Delete part not applicable) IF NOT RECOMMENDED, STATE FULL REASONS

SIGNED: CHAIRPERSON: SGB

INITIALS AND SURNAME:

DATE:

CONVERSION TO PERMANENT APPROVED / NOT APPROVED
IF NOT APPROVED, STATE FULL REASONS

SIGNED: DISTRICT DIRECTOR

DATE: