



## Special Advance Request Check List

### APPLICANTS PAY RECORD

**TO BE COMPLETED BEFORE FORWARD TO ACCOUNTANT GENERAL FOR APPROVAL**

**This form is to be attached to the Special Advance Request.**

<b>Applicants Name:</b>		<b>TPF# :</b>	<b>Level:</b>
<b>Estimate Net:</b>	\$	<b>Amount Requested:</b>	\$
<b>Amount Eligible to Advance:</b>	\$	Comments	
<b>Advance Position:</b>	1. Outstanding \$..... 2. Cleared [ Circle ]		
<b>Advance inline with Guideline?</b>	1. Yes 2. No [ Circle]		
<b>Advance Request Criteria:</b>	1. Compassionate Ground 2. Annual Leave 3. Contribute towards spouse & children's airfare [ Circle ]		
<b>Supporting Documents Attached:</b>	1. Yes 2. No [ Circle ]		

I certify that all of the information required by Special Advance Guidelines has been obtain and attached to this request

Payroll Checking Officer: .....  
 Sign: .....  
 Date: .....

I certify that the information indicated above complies with Special Advance Guidelines

Chief Payroll Officer's Certification: .....  
 Sign: .....  
 Date: .....

Accountant General's Approval:  
 Sign: .....  
 Date .....

**Approved/ Not Approved** [ Circle ]

Reason .....  
 .....  
 .....