

Address: \_\_\_\_\_

UT / ID Number \_\_\_\_\_

Date: \_\_\_\_\_

Human Resources Division  
 Stellenbosch University  
 Private Bag X1  
**MATIELAND**  
 7602

## ACCEPTANCE OF EXTENDED APPOINTMENT

I, \_\_\_\_\_, the undersigned acknowledge that I

- accept the extension of appointment as \_\_\_\_\_  
 in the Division/Department/Faculty \_\_\_\_\_  
 until (dd/mmm/yyyy) \_\_\_\_\_,
- understand the full implications of the composition of my cost of employment,
- have received and read, and accept the attached documentation,
- deem myself bound to all the conditions of employment, acts, codes, and procedures as well as the regulations of the University.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**NAME**