ABSENT AND DESERTION POLICY

Absent does not only mean not being at work. Absent also means:

- 1. Arriving late (or poor timekeeping. It is still absent as long as the employee is not at work.)
- 2. Leaving early (poor timekeeping. It is still absent if he is not at work)
- 3. Extended tea or lunch breaks the employee is not at the workstation, and therefore absent.
- 4. Attending to private business during working hours the employee is at work, but is not attending to his/her duties in terms of the employment contract and is therefore absent.
- 5. Extended toilet breaks same as extended lunch or tea breaks.
- 6. Feigned illness thus giving rise to unnecessary visits to the on-site clinic, or take time off to "visit the doctor" which they never do, because they don't need a medical certificate for less than 2 days off.
- 7. Undue length of time in fetching or carrying (tools from the tool room, for example, or drawings from the drawing office, etc)
- 8. Other unexplained absences from the workstation or from the premises.

AWOL (ABSENT WITHOUT LEAVE) POLICY

Absent without leave is creating an operational crisis, as well as unacceptable levels of service towards the clients. The financial burden in disciplining the guilty parties and loss of man-hours creates unacceptable problems:

The schedule of penalties for AWOL is as follows

1 Day with no excuse
 2 – 3 Days with no excuse
 Second written warning

3 Days with no excuse Final written warning

4 Days and more with no excuse Dismissal

Pattern forming AWOL Dismissal

The procedure if you know you is not going to be able to arrive for work

- 1. Phone the office 8 (eight) hours before the commencement of your shift in order to report your reason for not reporting for work.
- 2. Receive a reference number/name of a manager on duty.
- 3. Hand in your medical certificate on your first day of work after your absence to your operational manager. A medical certificate can only be from:
 - 3.1. A person entitled to practice as a medical practitioner in terms of section 17 of the Health Professions Act, 1974, (Act No. 56 of 1974).

AWOL PROCEDURE FOR MANAGERS

Desertion

A deserter is an employee who is absent from work for more than 3 days, without notifying you of the reason for the absence and you can show that he/she has no intention of returning to work. Remember that the intention to desert - the intention not to return to work - must be present. Therefore the manager cannot dismiss for desertion, an employee who has been off sick for 10 days without notification and who returns to work with a valid medical certificate. He had no intention to desert - he was sick.

The manager must be able to prove that he/she has attempted to contact the absent employee and the process would be as follow:

- 1. After 3 days sent out the 72 hours letter of desertion with registered post (see attached)
- 2. After 3 days send out the notice to attend a disciplinary enquiry with registered post (see attached)
- 3. After 7 days send out the second and final the notice to attend a disciplinary enquiry with registered post (see attached)
- 4. After 7 days and on the date of the final notice dismiss the employee in absentia.

Ensure that all employees regularly update the personal information document (see attached).

Company Name/Logo

Company address:	Tel:
	Fax:
	Email:
TO:	Date: / /
FROM:	
Notice Of Desertion	
Dear	
The Company has noticed that you	, failed to show up for work for
days. (Dates:	20). You are required to notify management
within 72 hours by providing them with a	valid reason and proof for not showing up for work and
when you are planning to return to work.	
Management will be forced to do a discip	olinary hearing in your absence if you fail do to so which
could lead to your possible dismissal.	
Regards	
Management	

NOTIFICATION TO ATTEND A DISCIPLINARY HEARING

NAI	ME:	CO NO:				
DA	ΓΕ:					
Dea	ar Sir, Madam					
You follo		tion, <u>second,</u> third time) to	o attend a disciplinary enquiry as			
Dat	e:	Time:				
Place:		Office:				
The	purpose of the enquiry is to i	nvestigate the following co	omplaints against you:			
1.	Absent from work from	at	·			
2.	Failure to report your abser	nce from	to Management of			
3.	Failure to provide valid proof of your absence from to Manager of					
A) B) C) D)	At this enquiry you will be afforded the opportunity to answer to the complaints against you. You have the right to a representative by a person of your choice within the Company. You may also call witnesses and present documentary and verbal evidence in support of the case at the enquiry. The proceedings will be conducted in English and you have the right to have the proceedings translated into your home language by an interpreter.					
	ase be advised that should yo ducted in your absence.	ou fail to attend, the enquiry	y, for the third time, it will be			
EM	PLOYEE:					
Cor	mp. Number:					
EM	PLOYEE SIGNATURE	DATE				
MA	NAGER SIGNATURE	WITNE	ESS SIGNATURE			

NOTIFICATION TO ATTEND A DISCIPLINARY HEARING

NAN	ЛЕ:	CO NO:			
DAT	E:				
Dea	r Sir, Madam				
	are hereby requested (dese	ertion, second, third and fir	nal time) to attend a disciplinary		
Date	ə:	Time:			
Plac	ce:	Office:			
The	purpose of the enquiry is to	investigate the following co	mplaints against you:		
1.	Absent from work from	at	·		
2.	Failure to report your abse	ence from	to Management of		
3.	Failure to provide valid proof of your absence from to Management of				
A) B) C) D)	you. You have the right to a rep You may also call witnesse the case at the enquiry. The proceedings will be co	presentative by a person of	•		
	ase be advised that should you	ou fail to attend, the enquiry	/, for the third time, it will be		
EMI	PLOYEE:				
Con	np. Number:				
EMF	PLOYEE SIGNATURE	DATE			
MAI	NAGER SIGNATURE	WITNE	ESS SIGNATURE		

PERSONAL INFORMATION

SURNAME	:		
NAME (full names)	:		
ID NUMBER	:		
TELEPHONE NO	:		
FAX NO	:		
CELL PHONE	:		
NEW RESIDENTIAL			POSTAL ADDRESS:
MARITAL STATUS			
NAME OF SPOUSE	:	BIRTI	HDAY:
DEPENDANTS	:		
NAMES OF DEPEND		DATE OF BIRTH	AGE
HIGHEST LEVEL OF			
EMPLOYER OF AN	Y CHANGES TO		OYEE TO INFORM THE D DETAILS AT ALL TIMES. IF ANY CHANGES THAT TOOK
EMPLOYEE SIGNAT	ΓURE:		
EMPLOYER SUPER	VISOR SIGNATU	RE:	_
DATE:			