

# Management Authorization for Delegation of Duties

Date: [Insert Date]

To: [Employee Name]

Position: [Employee Position]

Department: [Department Name]

Dear [Employee Name],

It is in our best interest to ensure that our operations continue to run smoothly. Therefore, I hereby authorize you to delegate your duties and responsibilities to [Delegated Employee Name] for the period of [Start Date] to [End Date]. This delegation is due to [reason for delegation, e.g., your temporary leave, special project, etc.].

During this time, [Delegated Employee Name] will assume the following responsibilities:

- [Responsibility 1]
- [Responsibility 2]
- [Responsibility 3]

I trust that [Delegated Employee Name] will uphold the standards of our organization and complete the delegated tasks with diligence.

If you have any questions regarding this delegation, please feel free to reach out to me directly.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Contact Information]