### Appendix 6: Sample Letter for delegation of authorities to Bureau Director

***Interoffice Memorandum***

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| --- | --- | --- | --- |
| To | Full name of Bureau Director | Reference |  |
| From | Administrator |  |  |
| Copy to: | Director Bureau of Management | Date | MMDDYYYY |

**Subject: Delegation of Authority**

Further to the responsibilities and authorities vested in the UNDP Administrator by General Assembly Resolution 2688 dated 11 December 1970 and consistent with the UNDP Accountability Framework (DP/2008/16 Rev.1) which was approved by the Executive Board in September 2008, I in my capacity as the UNDP Administrator, hereby delegate to you specific authorities consistent with your responsibilities as Director, [name of bureau] (see Annex A):

This delegation of authority is with effect from [**dd mmm yyyy]**. It shall remain valid and in effect while you hold the position of the Director **[name of Bureau]**, unless otherwise amended, repealed or superseded by myself or my successor or those vested with authorities to further delegate my authorities to you in writing.

In exercising your authorities, you will observe all UN Staff Regulations and Rules, UNDP Financial Regulations and Rules, the Internal Control Framework and policies promulgated in the Programme and Operations Policies and Procedures (POPP).

This authority extends to the interpretation of the abovementioned rules, policies, and ICF; additionally, exceptions may only be granted with respect to rules promulgated by me. In granting these exceptions, you will exercise your authority based on your considered professional judgment, in consultation with the Chief Finance Officer, taking into account the overall interest of the organization. Such exceptions, where deemed necessary, will be disclosed to me. You will also exercise judgment on exceptional cases to be escalated to me for decision.

Unless specifically indicated in Annex A, the authorities delegated to you may be further delegated to other managers without my prior consent. However, a record of such delegated authorities should be maintained by your office.

You will be personally accountable to me for the discharge of your delegated authorities.

Please sign below to indicate your acceptance of the conditions set forth above.

Delegated by: Accepted by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator Name of Bureau Director