

TO BE COMPLETED BY HIRING DEPARTMENT

Form Completed By : _____ Phone Number : _____

Dept. Name: _____ Dept. #: _____

Appointment

Employee Name: _____ Empl ID: _____ Empl Rec #: _____
(as seen in PeopleSoft)

Department Name: _____ Department #: _____ Payroll Unit #: _____

Semester: _____ Fall _____ Spring _____ Summer _____

Start Date: _____ End Date: _____

Full-Time Base Rate of Pay _____
Monthly Base Rate is the rate that would be paid if the faculty worked a 100% (1.0) Time Base per week. \$ _____

Time Base of Appointment: _____ Fraction of Appointment: _____

POSITION: (choose one)

Lecturers	2358 – Academic Year	2359 – 12 Month	GRANT FUNDED
Range at which Appointed:			
Instructional Faculty	2360 – Academic Year	2361 – 12 Month	GRANT FUNDED
Range at which Appointed:			
Temporary Librarian	2920 – 12 Month	2919 – 10 Month, paid over 12 Months	
Range at which Appointed:			
Student Services Professional <i>(Academic Related, 12 Month)</i>	3070 – SSP, AR I	3072 – SSP, AR II	3074 – SSP, AR III
Student Services Professional <i>(Academic Related, Academic Year)</i>	3071 – SSP, AR I	3073 – SSP, AR II	3075 – SSP, AR III
Other	Job Code: _____	Pay Title: _____	

DISTRIBUTION OF LABOR COST – Complete if using account other than department operating funds

Account	Fund	Finance Dept.	Project/Grant	Amount to be paid	% of distribution
601100					
601100					
601100					

Program / Class / Comments: _____

TO BE COMPLETED BY PRINCIPAL INVESTIGATOR (IF GRANT FUNDED)

Print Name: _____ Date: _____

Signature: _____

TO BE COMPLETED BY HIRING DEPARTMENT APPROPRIATE ADMINISTRATOR

Print Name: _____ Date: _____

Signature: _____

Approved and Keyed into PeopleSoft: _____ Date: _____

Copy of Grant Related Appointments Sent to Financial Services _____ Date: _____

cc: Personnel Action File