

TO BE COMPLETED BY HIRING DEPARTMENT

Form Completed By :		Phone Number :	
Appointment (as listed in PeopleSoft or on Social Security Card)			
Employee Name:			
Empl ID:	Empl Rec #:	PeopleSoft Position #:	
Department Name:		Department #	Payroll Unit:
Start Date:		End Date:	
Full-Time Base Rate of Pay <i>Monthly Base Rate is the rate that would be paid if the faculty worked a 100% (1.0) Time Base per week.</i>			\$
Time Base of Appointment:		%	Fraction of Appointment:
POSITION: (choose one)			
2436: Post-Masters Counselor Intern <i>(As part of meeting post-master's requirements after completing an accredited masters level program in counseling, marriage and family therapy or social work)</i>			
2437: Pre-Doctoral Counselor Intern <i>(As part of meeting pre-doctoral requirements for receiving a degree in an accredited doctorate level behavioral sciences, counseling, or specified related academic field, or psychology program)</i>			
2338: Post-Doctoral Counselor Intern/Fellow <i>(as part of meeting post-doctoral requirements after receiving a degree in an accredited doctorate level program in behavioral sciences, counseling, or a specific related academic field, or psychological counseling)</i>			

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
601803				\$	%
601803				\$	%
601803				\$	%
Program / Class / Comments:					

TO BE COMPLETED BY HIRING DEPARTMENT APPROPRIATE ADMINISTRATOR

Print Name:	Date:
Signature:	

TO BE COMPLETED BY VICE PRESIDENT FOR ADMINISTRATION AND FINANCE

Print Name:	Date:
Signature:	

FACULTY AFFAIRS USE ONLY

cc: Personnel Action File

Approved and Keyed into PeopleSoft:	Date:
Copy Sent to Financial Services	Date:

Submit to: [Temporary Faculty Employment Specialist](#)