

Office of Faculty Affairs

PRE AUTHORIZATION FOR FACULTY SPECIAL CONSULTANT APPOINTMENT

Part-Time Faculty Special Consultant Appointment Use Only To Be Submitted To Faculty Affairs Ten Days Prior To Start Of Assignment

TO BE COMPLETED BY HIRING DEPARTMENT						
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Employee Name:		Employee ID:				
As Listed in PeopleSoft		Employee ID:				
Hiring Dept.:		Hiring Dept. #:				
APPOINTMENT DURATION						
(MAY NOT EXCEED A SIX MONTH PERIOD)	APPOINTMENT CO	MPENSATION				
Start Date:	Estimated Days of Work					
End Date:	Daily Compensation Rate		X			
	Total Proposed Compensation		Ш			
POSITION PURPOSE Under general direction, the Special Consultant performs special assignments of a temporary nature, based on a particular knowledge ability or expertise. Incumbents in this classification perform administrative studies, make appropriate recommendations, conduct oral briefing of study results and prepare written reports. Incumbents may be asked to work with other SSU personnel to implement a desired plan of change, providing the necessary coordination, guidance and training. MAJOR DUTIES AND DELIVERABLES (to be completed by Appropriate Administrator)						

WORK ENVIRONMENT

Duties are performed in various locations on the Sonoma State University campus and remotely using standard office technology that may require the use of a computer and/or other audiovisual equipment.

MINIMUM QUALIFICATIONS

Extensive experience in the area or specialty for which the Special Consultant services are being required, and which demonstrates that the incumbent has applied successfully a wide variety of knowledge and skills to achieve objectives.

CONDITIONS OF APPOINTMENT

Special Consultant appointments are approved only for the dates, daily rate, and total number of days specified in this agreement. Any changes in the period of employment, the daily rate, the total number of days authorized, or assignments must be submitted on a new agreement form and approved by the Office of Faculty Affairs. Special Consultant appointments automatically expire at the end of the period stated and do not establish consideration for subsequent appointments. If the assignment, as described in this agreement, is not completed or is not completed in a satisfactory manner, the University reserves the right to cancel this appointment or to reduce the total number of days for which payment will be made. Current CSU system employees who accept additional employment as Special Consultants are subject to the Additional Employment Policy of the California State University (HR 2002-05) and the Unit 3 (Faculty) Collective Bargaining Agreement both of which limit total employment within the CSU to a maximum of 125% of full time.

BENEFITS

Special consultants may be eligible for Worker's Compensation Insurance and Unemployment Insurance.



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PAYMENT PROCESS

Special Consultants are paid on a daily rate basis. An approved <u>Faculty Special Consultant Payment Voucher</u> must be submitted to the project supervisor, in accordance with their instruction, before the campus Payroll Office can request payment from the State Controller's Office. If paid on a monthly basis, a separate voucher is required for each pay period

Consultants on the State's Direct Deposit Program will have their checks deposited; Consultants who wish to have their checks mailed must submit a self-addressed stamped envelope to their appropriate administrator.

TO BE COMPLETED BY AUTHORIZED APPROPRIA	ΓΕ ADMINISTRATOR			
I certify that this work is legitimate additional employment and that the compensation is reasonable for the work performed. I have reviewed the Guidelines For Faculty Special Consultant Appointments and this appointment will be consistent with the appropriate CSU guidelines and the Unit 3 Collective Bargaining Agreement.				
If Grant Funded, Principal Investigator Signature:				
Appropriate Administrator Name (Print):				
Signature:	Date:			
TO BE COMPLETED BY THE FACULTY MEMBER				
I confirm this appointment is considered 'Additional Employment' per the Faculty Collective Bargaining Agreement. Please confirm which CBA definition applies to your work: This work is substantially different in nature from my primary employment as SSU/CSU faculty. And / Or This appointment is paid from non-general fund sources. I have read the "Conditions of Employment" as outlined and acknowledge that I may not exceed the stated total employments limits within the CSU of 125% of full-time base. I agree to perform the duties described above within the time period indicated. If I am a new or returning employee, I understand I will need to provide identification documents				
and complete certain forms prior to the effective date of this a made without an approved Special Consultant Voucher submithat copy of this form and payment vouchers will be placed in I certify that this Special Consultant assignment will not confl	ppointment. In addition, I understand that no payment is itted to the Payroll Office for each pay period worked and my Personnel Action File.			
Signature:	Date:			
Submit Completed Form To: FacultyAffairs @sonoma.edu				
FACULTY AFFAIRS ADMINISTRATIVE REVIEW	cc: Personnel Action File			
Reviewed By:	Pre-Authorization Reference No. :			
Approved: YES NO	Special Consultant Record No. :			
Additional Notes:				