

TO BE COMPLETED BY HIRING DEPARTMENT			
Employee Name: <i>As Listed in PeopleSoft</i>		Employee ID:	
Hiring Dept.:		Hiring Dept. #:	
APPOINTMENT DURATION <i>(MAY NOT EXCEED A SIX-MONTH PERIOD)</i>		APPOINTMENT COMPENSATION	
Start Date:	Estimated Days of Work:		
End Date:	Daily Compensation Rate:	X	
	Total Proposed Compensation	=	

POSITION PURPOSE

Under general direction, the faculty member 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.

TO BE COMPLETED BY AUTHORIZED APPROPRIATE ADMINISTRATOR	
Project Name:	
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 Additional Appointments and this appointment will be consistent with the appropriate CSU guidelines and the Unit 3 Collective Bargaining Agreement.	
<i>If Grant Funded, Principal Investigator Signature:</i>	<i>Date:</i>
<i>Appropriate Administrator Signature:</i>	<i>Date:</i>

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 services are being required, and which demonstrates that the incumbent has applied a wide variety of knowledge and skills to achieve objectives.

BENEFITS

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

CONDITIONS OF APPOINTMENT

Part-Time Additional Employment 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 Academic Personnel. Part-Time Additional Employment appointments automatically expire at the end of the period stated and do not establish consideration for subsequent appointments. If the assignment 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 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.

PAYMENT PROCESS

Part-Time Additional Employment is paid on a daily rate basis. An approved Payment Voucher 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. Faculty members on the State's Direct Deposit Program will have their checks deposited; faculty members who wish to have their checks mailed must submit a self-addressed stamped envelope to their appropriate administrator.

TO BE COMPLETED BY THE FACULTY MEMBER	
<p>I confirm this appointment is considered 'Additional Employment' per the Faculty Collective Bargaining Agreement. Please confirm which CBA definition applies to your work:</p> <p><input type="checkbox"/> This appointment is substantially different in nature from my primary employment as SSU/CSU faculty.</p> <p>And / Or</p> <p><input type="checkbox"/> This appointment is paid from non-general fund sources.</p> <p><i>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 appointment. In addition, I understand that no payment is made without an approved Payment Voucher submitted for each pay period worked and that a copy of this form and payment vouchers will be placed in my Personnel Action File.</i></p> <p><i>I certify that this Additional Employment assignment will not conflict with my regular SSU employment.</i></p>	
Faculty Signature:	Date:

Submit Completed Form To: facultyadd@sonoma.edu

ACADEMIC PERSONNEL ADMINISTRATIVE REVIEW		<i>cc: Personnel Action File</i>
<i>Pre-Auth #:</i>	<i>Empl Rec #:</i>	
<i>Approved and Keyed into PeopleSoft</i>	<i>Initial:</i>	<i>Date:</i>
<i>Additional Notes:</i>		