

Appointment Recommendation for Temporary Help (Less than 16 weeks; no presidential letter)

Form #10

Revised 9/03 YELLOW ORIGINAL

☐ New Appointment – Attach Resume - Needs I-9 (complete in Office of Human Resources) (Complete all items below)

☐ Reappointment (complete only * items)

*Name: _____

Home Address: _____

SS#: _____ Date of Birth: _____

Department: _____

Payroll Title: _____

Campus Title: _____

*Employment Dates: _____ To: _____

*Salary: _____ Pay Basis: ☐ hrly: ☐ biw. ☐ sem. _____ hrs per wk

*Account #: _____ ☐ PSR ☐ Temp Service

(Signature – Supervisor)

(Date)

(Signature – Dean/Next Level)

(Date)

(Signature – Vice President)

(Date)

Payroll Verification

Total Actual Pay _____.

By: _____ Date: _____.

Business Office Verification

By: _____ Date: _____.

Human Resources Verification

Line # _____.

By: _____ Date: _____.