CNR STUDENT/TEMPORARY STAFF EMPLOYMENT FORM

Please select one of the following:

NEW HIRE (has never previously worked for UI)

ADDITIONAL APPOINTMENT

CONTINUATION – UPCOMING TERMINATION DATE:

REAPPOINTMENT – TERMINATION DATE: ______

PAY RATE CHANGE

Employee Information			
Name:	V#:		
Address:	Phone:		
		Email:	
Department Information	n		
Department:	Supervisor:		
Appointment Details			
Position Type: Student Temp Non-Student Temp Non-Student PERSI Temp	Position Title:	Description of Duties (please be concise, 2-3 sentences):	
	Position Pay Rate:		
			ity, State):
Start Date:	Budget Index(es): Check here if position is federally funded (partially or entirely). Federally funded positions subject to Dean's Office approval. Check here if planning to have multiple timesheets		Hours Per Week: *PERSI Rules: Non-Student, 20+ hrs, more than 5 month
Regulatory Information			
For reappointments and pay raises, p		ork Authorization Card	I Date:
Driving Authorization			
Vill employee need to be authoriz	zed to drive UI/Co-op vehicles? *Ir	nstructions will not be ser	nt until I-9 has been completed* 🗖 Yes 🗖 No
I temporary employees	MUST present a valid Wo	rk Authorization C:	ard to their supervisor/department

Employee Signature *Not needed if a pay raise or reappointment

Date