

# APPOINTMENT REQUEST FORM

Non-Classified Personnel

New Appointment \_\_\_\_\_ (complete front & back)  
Continuing Appointment \_\_\_\_\_ (complete front only) No. \_\_\_\_\_  
Amended Appointment \_\_\_\_\_ (complete front only) Date \_\_\_\_\_  
Graduate/Teaching Assistant Fee Waiver \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring

**INSTRUCTIONS:** Department Head, Dean, or other Budget Unit Head will initiate and retain one copy. Completed original form should then be forwarded to appropriate offices for signature. Official transcripts for new teaching faculty should accompany the original appointment form. This form should be fully processed with complete information **prior** to the effective date of employment. All new appointments should be fully processed and have Board of Supervisor approval prior to the effective date of employment. (Graduate and Teaching Assistant appointments do not require Board of Supervisor approval.) Forms not received in the Office of Human Resources by the 15<sup>th</sup> of the month will be processed the following month. The Office of Human Resources will forward a final approved copy to appropriate unit(s). \*If a blank does not apply type n/a.

Name \_\_\_\_\_  
Last First Middle  
Address \_\_\_\_\_  
Local Street Address \_\_\_\_\_  
City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date Effective \_\_\_\_\_  
Social Security No. \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
\_\_\_\_\_ Male \_\_\_\_\_ Female  
Marital Status \_\_\_\_\_  
Race \_\_\_\_\_ Nationality \_\_\_\_\_  
VISA No. \_\_\_\_\_

### Educational Attainments

Degrees	University	Year Earned
Doctorate	_____	_____
Master	_____	_____
Bachelor	_____	_____
Department	_____	_____
Rank or Discipline	_____	_____

### Experience:

Higher Education \_\_\_\_\_  
Years at Tech \_\_\_\_\_  
Other \_\_\_\_\_  
Total Experience \_\_\_\_\_  
Requested Salary (Yr.) \_\_\_\_\_  
Amount to be Paid \_\_\_\_\_  
Base Monthly  
\_\_\_\_\_ Full-Time  
\_\_\_\_\_ Part-Time \_\_\_\_\_ (% Full-Time)

Salary Basis: \_\_\_\_\_ 9-Mo. \_\_\_\_\_ 12-Mo. \_\_\_\_\_ Quarterly \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Released-time: \_\_\_\_\_ % Salary Charged to \_\_\_\_\_  
(Grant or Contract & Code)

Retirement: \_\_\_\_\_ Social Security \_\_\_\_\_ Teachers' \_\_\_\_\_ Employees' \_\_\_\_\_ ORP \_\_\_\_\_

	Department Codes	Budget Page & Line No.	%	Monthly Amt.	Time Periods	Total Funds
Major Split	_____	_____	_____	_____	_____	_____
Grant	_____	_____	_____	_____	_____	_____
Grant	_____	_____	_____	_____	_____	_____

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested _____	Project Director (Grants Only) _____	Date _____	Budget Officer _____	Date _____
_____	Dept. or Budget Unit Head _____	Date _____	Division Head _____	Date _____
_____	Dean _____	Date _____	President _____	Date _____
_____	University Research (Grant Funds Only) _____	Date _____	Office of Human Resources _____	Date _____

Form Completed by: \_\_\_\_\_  
Ext#: \_\_\_\_\_

(Please list in reverse order stating the most recent experience first) Credentials, Experience page, and Transcripts on file. \_\_\_\_\_

A. HIGHER EDUCATION EXPERIENCE DATES

University (or employer)                      Position of Service                      From                      To

B. OTHER EDUCATIONAL EXPERIENCE

Employer                      Position and Nature of Service                      From                      To

C. OTHER EXPERIENCE

1. Since Baccalaureate Degree

Employer                      Position and Nature of Service                      From                      To

2. Prior to Baccalaureate

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SUMMARY EVALUATION:

Total Years of Experience in Higher Education                      \_\_\_\_\_  
Of These, Years Applicable to Present Teaching Field                      \_\_\_\_\_  
All Other Experience                      \_\_\_\_\_  
Other Experience Applicable to Present Work                      \_\_\_\_\_  
TOTAL                      \_\_\_\_\_

Evaluated By:

\_\_\_\_\_  
Budget Unit Head

Concurred By:

\_\_\_\_\_  
Dean or Director

\_\_\_\_\_  
Vice President