

EHRA-NF Administrative Employment Pay Authorization

Employee Information

Title:	Full Legal Name:		
SSN:	BID:		
Department:			
Department Org Code:	Timesheet Org Code:	Original Hire Date:	
CIP (HEGIS) Code:	Faculty Rank <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, provide rank, department and title in comment box)		
<input type="checkbox"/> C.V./Resume Included (Required for new appointment)		<input type="checkbox"/> Letter of Offer	

Action Information

Action Description:			
From:		To:	
Action Description:			
From:		To:	
<input type="checkbox"/> Prorate Date:	<input type="checkbox"/> Retroactive Date:	<input type="checkbox"/> Earns Leave From:	To:
Type of Appointment:		If T3 Temp, Hours Per Week	
Salary (\$):	# of Installments:	Begin Pay Date:	End Pay Date:

Position Information

Employee Class:	Position #:	Job FTE:
EHRA Administrative Title:		EHRA Admin Title Code:
Type of Search:	If waived, explain:	
<input type="checkbox"/> Position Description Included (Required for change in job duties)	Supervisor:	

Comments:

Budget Information

Salary Justification:			
Fund:	Org:	Account:	Program:
Prepared By:			Date:
Funding is available and approved by appropriate Budget Office. EEO Compliance forms are on file for review. Chancellor/Vice Chancellor/Athletic Director Signature:			Date:

Human Resource Services Use Only

Human Resource Services Approval:
HRS USE ONLY Change Reason Codes: