

Personnel Staff Request

Name of Supervisor/Requestor : \_\_\_\_\_

Need For: College Center PSID:\_\_\_\_\_

Name of New Hire: \_\_\_\_\_

Funding/Cost Center: \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Proposed Pay Rate : \_\_\_\_\_ Monthly/Biweekly\_\_\_\_\_

***For All Positions:***

Job Title: \_\_\_\_\_

Security Sensitive Position: Yes No

Employment Type: Full time Part Time FTE: \_\_\_\_\_  
(Check all that apply) Permanent Temporary

***For Student Positions:***

Enrolled Not Enrolled Semester: \_\_\_\_\_

Brief Statement of Duties

Requestor: By signing this form you acknowledge the information concerning the employment of the above named individual is accurate. Upon assignment end or termination, you agree to notify the appropriate office immediately so proper action can be taken.

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date

After completion and submittal of this form, please send the prospective employee to the appropriate office for processing. All employees must provide documentation to establish identity and employment eligibility.

Business Office Use Only

Received By: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

Remarks after processing: