

A. EMPLOYEE INFORMATION **NEW (COMPLETE SECTION B)** **REHIRE** (Update Section B if last employed more than 1 year ago)

NAME: _____
First Middle Last

ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE: _____ EMAIL: _____

RETIREMENT SYSTEM: ERS TRS SUNY TIAA-CREF RETIRED RETIREMENT MEMBERSHIP #: _____ DATE OF MEMBERSHIP: _____

B. NEW AND REHIRED EMPLOYEE INFORMATION

The following forms must be completed and submitted to [Human Resources](#) to ensure appointment and payment:

- [DEMOGRAPHIC](#) [I-9](#) [W-4](#) [IT-2104](#) [OATH OF OFFICE](#)

C. APPOINTMENT INFORMATION

DEPARTMENT: _____ BUDGET TITLE: _____

APPOINTMENT TYPE (CHECK ALL THAT APPLY): **FT Term** **PT Term** _____% **FT Temp** **PT Temp** _____%

MC **Casual** **Volunteer** **Stipend** **Additional Assignment** **Summer Session** **Winterim** **Scholarship**

Extra Service (This extra service will not interfere with employee's normal obligation to the college. Extra service is limited to 20% of the base pay)

APPOINTMENT DATE: From (mm/dd/yy): _____ To (mm/dd/yy): _____

OBLIGATION: Academic Year (10 mos.) Calendar Year (12 mos.) College Year (less than 12 mos.) Summer Session Winterim

Period of no obligation: From (mm/dd/yy): _____ To (mm/dd/yy): _____

Comments: _____

D. COURSE DETAIL

FALL		WINTERIM		SPRING		SUMMER		FOR PAYROLL USE ONLY	
COURSE NO.	COURSE NAME	DATES	# OF CREDIT	SALARY			ACCOUNT #	PAYROLL DATES	

E. BUDGET AND PAYROLL INFORMATION

TOTAL SALARY: _____ CTRL #: _____ PSR: _____ TEMP SERVICE: _____ VER. BY HR: _____

F. AUTHORIZATIONS

The salary indicated above is based on a minimum of _____ students enrolled in an undergraduate course or a minimum of _____ students enrolled in a graduate course. Courses with enrollments that do not meet these minimums and summer sessions are subject to salary pro-rata or cancellation.

EMPLOYEE: _____ Date: _____
(For Extra Service, Summer Session & Winterim Only)

DEPT. CHAIR/SUPERVISOR: _____ Date: _____

DEAN/DIRECTOR: _____ Date: _____

VICE PRESIDENT: _____ Date: _____

BUSINESS AFFAIRS: _____ Date: _____

HUMAN RESOURCES: _____ Date: _____

G. DEAN/DIRECTOR USE ONLY

High Priority Processing

Maintain Active CCA (returning Adjuncts)

H. PAYROLL COMMENTS