

TEMPLE UNIVERSITY
Of the Commonwealth System of Higher Education
FACULTY HRS HIRING AUTHORIZATION
 PLEASE DO NOT FILL IN ANY OF THE SHADED BOXES

**TO BE COMPLETED FOR:
 ALL FULL TIME AND PART TIME
 FACULTY**

SCHOOL/DEPARTMENT/SECTION	DATE PREPARED	CONTACT TELEPHONE	WORK LOCATION	HSC REQ #
NEW OR REPLACEMENT	PERSON BEING REPLACED	LENGTH OF APPOINTMENT:	ACT 33?*	CHEM?*
* WORK WITH CHILDREN UNDER THE AGE OF 18; "Y" IF ACT 33 REQUIREMENTS APPLY; "N" IF ACT 33 DOES NOT APPLY ** THE EMPLOYEE MAY BE EXPOSED TO THE HAZARDOUS CHEMICALS; "Y" IF CHEMICAL RIGHT TO KNOW NOTIFICATION IS REQUIRED; "N" IF NOT REQUIRED				
TYPE OF APPOINTMENT <input type="checkbox"/> (N) NON-TENURED <input type="checkbox"/> (P) TENURED TRACK <input type="checkbox"/> (D) DEAN'S <input type="checkbox"/> (R) DEAN'S / RESEARCH	<input type="checkbox"/> (T) TENURED <input type="checkbox"/> (V) VISITING <input type="checkbox"/> (G) CLINICIAN EDUCATOR TRACK (CET) <input type="checkbox"/> (E) CLINICIAN SCHOLAR OPTION (CS) <input type="checkbox"/> (C) CLINICAL PART-TIME	<input type="checkbox"/> (A) ADJUNCT	ACADEMIC RANK <input type="checkbox"/> (01) PROFESSOR <input type="checkbox"/> (02) ASSOCIATE PROF. <input type="checkbox"/> (03) ASSISTANT PROF.	<input type="checkbox"/> (04) INSTRUCTOR <input type="checkbox"/> (06) LECTURER <input type="checkbox"/> (07) SR. LECTURER <input type="checkbox"/> (08) DISTINGUISHED LECTURER

TUId	SOCIAL SECURITY NUMBER *	DOES JOB REQUIRE HEP B VACCINATION? <input type="checkbox"/> Yes <input type="checkbox"/> No UNESCORTED ACCESS RADIOACTIVE MAT'L? <input type="checkbox"/> Yes <input type="checkbox"/> No					
DATE OF BIRTH (MM/DD/CCYY)	ORG ID	EMPLOYEE'S NAME (LAST NAME, FIRST NAME, MIDDLE INITIAL)	ACTION EFFECTIVE DATE (MM/DD/YY)				
ACTIONS: 01 - NEW HIRE 14 - REHIRE	SUFFIX	PREFIX	BU	EMP STAT	EMPLOYMENT STAT DATE (MM/DD/CCYY)	EMPLOYMENT DATE (MM/DD/CCYY)	REG/TEMP <input type="checkbox"/> R - REGULAR <input type="checkbox"/> T - TEMPORARY
FULL/PART <input type="checkbox"/> F - FULL TIME <input type="checkbox"/> P - PART TIME	PAY STAT	SENIORITY DATE (MM/DD/CCYY)	ORIG HIRE DATE (MM/DD/CCYY)	Org (Location)	CONTRACT TYPE: <input type="checkbox"/> AY-ACADEMIC YEAR <input type="checkbox"/> FY-FISCAL YEAR		

POSITION CONTROL #	JOB BEGIN DATE (MM/DD/CCYY)	JOB END DATE (MM/DD/CCYY)	JOB CLASS	JOB CLASS ENTRY DATE (MM/DD/CCYY)	PAY RATE (MONTHLY BASE 999999.999)	PAY RT CD	
GRADE	STEP	% FULL TIME	# OF MONTHS TO PAY THE FACULTY MEMBER:	PAID FOR	PAY CYCLE	ORG (JOB)	TIME RPT CD
SHIFT	JOB SENIORITY DATE (MM/DD/CCYY)	JCAHO	ADJ JOB SENIORITY DATE (MM./DD/CCYY)	DAYS/WEEK	HRS/WEEK		

ACCOUNT DISTRIBUTION

Fund	Org	Account	Prog	EARN TYP	RATE/AMT (999999.999)	PERCENT	START DATE (MM/DD/YY)	STOP DATE (MM/DD/YY)
Fund	Org	Account	Prog	EARN TYP	RATE/AMT (999999.999)	PERCENT	START DATE	STOP DATE
Fund	Org	Account	Prog	EARN TYP	RATE/AMT (999999.999)	PERCENT	START DATE	STOP DATE
Fund	Org	Account	Prog	EARN TYP	RATE/AMT (999999.999)	PERCENT	START DATE	STOP DATE
Fund	Org	Account	Prog	EARN TYP	RATE/AMT (999999.999)	PERCENT	START DATE	STOP DATE
TOTAL					RATE/AMT (999999.999)	PERCENT		

APPROVALS HEALTH SCIENCE CENTER

UNIVERSITY

DEPARTMENT /SCHOOL	DATE	R.P.D (GRANT FUNDED)	DATE
SPONSORED PROGRAMS	DATE	DEAN	DATE
HSC FINANCE	DATE	VICE PRESIDENT OR PROVOST	DATE

* Temple University requests your Social Security number (SSN) because federal, state, and local law requires the University to report the name, address, and SSN for certain purposes. Temple University will not disclose your SSN without consent unless it is required to do so by law, or as permitted by the University's Social Security Number Usage Policy (http://policies.temple.edu/getdoc.asp?policy_no=04.75.11).

ACCOUNT DISTRIBUTION (CONTINUED FROM FRONT OF FORM)

Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
Fund	Org	Account	Prog	ERN TYP	RATE/AMT	PERCENT	START DT	STOP DT
				TOTAL:	RATE/AMT			

QUALIFICATIONS
POSITION DESCRIPTION - CONTINUED. (IF ADDITIONAL SPACE IS REQUIRED FOR THE JOB DESCRIPTION, ATTACHED SHEET)
EDUCATION, EXPERIENCE AND SPECIAL SKILLS

NEW POSITION JUSTIFICATION

IDENTIFY BUDGET FUNDING NECESSARY TO FUND NEW POSITION	BUDGET TRANSFER					
<input type="checkbox"/> INCREASED LAPSES	POSITION NUMBER	Fund	Org	Account	Prog	AMOUNT
<input type="checkbox"/> TRANSFER FROM ANOTHER POSITION						
<input type="checkbox"/> PERMANENT TRANSFER FROM NON COMP						
<input type="checkbox"/> INITIAL BUDGET DEVELOPMENT – Budget Transfer section not applicable						
<input type="checkbox"/> NEW GRANT/EXTERNAL FUNDING – Budget Transfer section not applicable						
<input type="checkbox"/> OTHER						
Describe:	TOTAL					

APPLICANT EMPLOYED	STARTING DATE	TOTAL RATE/AMT	HOURLY WEEKLY BIWEEKLY MONTHLY	NEW HIRE TRANSFER PROMOTION
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