



APPOINTMENT -OR- CHANGE OF STATUS

- New Hire
- Change
- Additional Appointment
- Seasonal Re-Hire

- Gray shaded sections necessary for new hires only. (Complete information as available.)
- For New Hire: Use this form after the interview process has been completed and a formal offer is to be extended based on the details reported below. Please attach resume, references, transcripts, and other applicable documents.
- For Current Employee: Use this form to initiate a change in the current status or add an additional appointment.

Position		Employee Name	
Department		Campus Phone	Campus Location
Division		Gannon ID	Home Phone
Start/Change Date	End Date (if temporary)	Home Address	
Budget/GL#	Percent		
____ - ____ - ____ - ____ - ____ - ____	_____ %		
____ - ____ - ____ - ____ - ____ - ____	_____ %		
		Comments	
Compensation		Reference Check: <input type="checkbox"/> Requested <input type="checkbox"/> On File <input type="checkbox"/> By Phone <input type="checkbox"/> By Mail <input type="checkbox"/> In Person	
Salary Grade _____		No. Contacted _____ Contacted By _____	
<input type="checkbox"/> Non-Exempt Hourly Rate _____		Highest Educational Degree _____ Year _____ Institution _____	
<input type="checkbox"/> Exempt Annualized Salary _____		Certified by Dean's Office:	
		Terminal Degree? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Verified by Human Resources Representative:	
		<input type="checkbox"/> Degree Verified OR <input type="checkbox"/> Enrollment Verified	
		<input type="checkbox"/> Child Abuse Clearance <input type="checkbox"/> Criminal Background Check	
		<input type="checkbox"/> Driving History Clearance <input type="checkbox"/> Transcript on File	
Classification		New Status	Annual Term
<input type="checkbox"/> Executive		<input type="checkbox"/> Full-time	<input type="checkbox"/> 12 month
<input type="checkbox"/> Managerial		<input type="checkbox"/> Part-time	<input type="checkbox"/> 10 month
<input type="checkbox"/> Professional		<input type="checkbox"/> Adjunct	<input type="checkbox"/> 9 month
<input type="checkbox"/> Professional Technician			<input type="checkbox"/> 4 month
<input type="checkbox"/> Support, Office			<input type="checkbox"/> Other _____
<input type="checkbox"/> Support, Service		Status Changed From	Hours/Week
<input type="checkbox"/> Support, Craft		<input type="checkbox"/> Part-time to Full-time	<input type="checkbox"/> 40 <input type="checkbox"/> 20
<input type="checkbox"/> Graduate Assistant		<input type="checkbox"/> Full-time to Part-time	<input type="checkbox"/> 37.5 <input type="checkbox"/> 16
<input type="checkbox"/> Teaching		Note If:	<input type="checkbox"/> 32 <input type="checkbox"/> 8
<input type="checkbox"/> Administrative/ Research		<input type="checkbox"/> Transfer	<input type="checkbox"/> 30 <input type="checkbox"/> _____
<input type="checkbox"/> Faculty		<input type="checkbox"/> Promotion	(Former Hours _____)
Faculty Rank:		<input type="checkbox"/> Reclassification	
<input type="checkbox"/> Professor		<input type="checkbox"/> Other	
<input type="checkbox"/> Assoc. Professor		Comments	
<input type="checkbox"/> Asst. Professor			
<input type="checkbox"/> Instructor			
<input type="checkbox"/> Lecturer (Adjunct)			
AUTHORIZATIONS: Please sign and forward for appropriate authorizations			
Hiring Manager:		Date	
Dean* / Director:		Date	
Budget Director:		Date	
President's Staff Member:		Date	
V.P. for Finance & Administration:		Date	
President:		Date	
Human Resources Verification:		Date	Payroll Verified:

*For Graduate Assistants, Graduate Dean signs as well.