

PHYSICAL PLANT SESSIONAL APPOINTMENT NOTICE

REVISED PPSAN
 CHANGE IN EXISTING JOB
 CHANGE IN ACCOUNT CODE

EFFECTIVE DATE (YYYY-MM-DD)	EMPLOYEE: FIRST NAME	MIDDLE NAME	LAST NAME	EMPLOYEE ID NUMBER
BIRTHDATE (YYYY-MM-DD)			GENDER	SIN
COUNTRY	ADDRESS			
CITY	PROVINCE	POSTAL CODE		
ACTION	REASON CODE	DEPARTMENT		DEPT. CODE
JOB TITLE			JOB CODE	

JOB STATUS	STD HRS	VACATION	PAY TYPE	RATE TYPE	AMOUNT
TF (SESSIONAL)		Four	Salaried	Monthly	

EARNINGS CODE RPP	ACCOUNT NUMBER	100%
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CITIZENSHIP COUNTRY	CITIZENSHIP STATUS (IF EMPLOYMENT/STUDENT AUTHORIZATION HOLDER, ATTACH COPY OF DOCUMENT)		
AUTHORIZATION NUMBER	AUTH. START DATE (YYYY-MM-DD)	AUTH. END DATE (YYYY-MM-DD)	
COMMENTS			
UWO STUDENT NUMBER			

ADDITIONAL PAY

EARNINGS CODE PLB	EFFECTIVE DATE (Same as above)	ACCOUNT NUMBER (Same as above)
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DEPARTMENT AUTHORIZATION _____ DATE _____

E/R

P/R

ER #

DEAN/BUDGET HEAD AUTHORIZATION _____ DATE _____