

STAFF APPOINTMENT NOTICE

REVISED SAN
CHANGE IN EXISTING JOB
CHANGE IN ACCOUNT CODE

REQUEST FOR STAFF
NEW POSITION (PDQ ATTACHED)
REPLACEMENT FOR:

CONTACT NAME:

PHONE #

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	APPT END (YYYY-MM-DD)	DEPARTMENT	DEPT. CODE	
JOB TITLE			JOB CODE		

JOB STATUS	STD HRS	PAY TYPE	RATE TYPE	AMOUNT
RF (CONTINUING)		Salaried	Annual	
RP (JOINT APPT.)		Salaried	Annual	
RP (SESSIONAL)		Salaried	Annual	
RP (SESSIONAL)	1.0	Hourly	Hourly	

FOOD SERVICES (RF UNION STAFF ONLY)

RF	40.0	Hourly	Hourly	
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THIS SECTION MUST BE FILLED OUT FOR TF/TP STATUS - WRITTEN CONTRACT MUST BE ATTACHED

JOB STATUS	STD HRS	VACATION	PAY TYPE	RATE TYPE	AMOUNT
TF (TERM)			Salaried	Monthly	
TP (TERM)	1.0		Hourly	Hourly	

ACCOUNT CODE #1	ACCOUNT CODE #2	ACCOUNT CODE #3
%	%	%

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			

DEPARTMENT AUTHORIZATION _____ DATE _____

E /R

P/R

ER #

DEAN/BUDGET HEAD AUTHORIZATION _____ DATE _____