

Request for Interim Appointment/ Temporary Added Duties

Please complete, save, & print this form. After signing, please scan and	e-mail for approval routing. Please route only to the next of	ffice in the routing queue.
Employee Data		
Employee Name:	Employee U#:	
Current Title:	Current Position Number:	
Department/Division:	College/School:	
Action		
Choose only one:	Effective Start Date:	
Interim Appointment:NewExtension	n Effective End Date:	
Temporary Added Duties:NewExtens	(complete one)	
Vacant Position for Interim Assignment:	\$ per y	ear (exempt)
	Additional Salary Amount: \$	
	HR will approve final salary; department to provide	(Circle one) budget info if paid from separate index
Requester Signature DEPARTMENT HEAD: I request approval of the appointment as specific al	bove. I understand all signatures are requi	red for final approval.
Approval Signatures	(Signature)	(Bate)
PROVOST/VICE PRESIDENT		
ApprovedDisapproved	gnature) (Date)	
PRESIDENT: Presidential approval only required if employee i	is a direct report to Provost or Vice President.	
ApprovedDisapproved (Sig	gnature) (Date)	
HUMAN RESOURCES		
HOWAN RESOURCES		
Approved Disapproved	gnature) (Date)	
Approved Disapproved	gnature) (Date)	

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