REQUEST FOR FACULTY APPOINTMENT WITHOUT RECRUITMENT AUTHORIZATION FORM (PROV 200 Form)

Banner ID:	Na	me:			
		Last	First		Middle
New hire □	(never employed by	Auburn University)			
Rehire	(has been employed but did not convert		y but has a status of termin	nated or has been employ	ed by Auburn University
Retiree Rehire	D (* 16 A 1	TT ' '/			
	Retired from Auburn Retired from another	•	na stata aganay		
	Retired from another	TKS/EKS participati	ing state agency		
	time employee \square (\square 12 mo faculty			nal: Yes □ No □ Iditional resources, inclu	ding space
Attach UPO-10 payroll) for faculty or HR-1	2 for Admin/Prof. I	Position will be processed	as a Z Job (ADJZJ) an	d paid on bi-weekly
Home Org:		Home Dept:			<u> </u>
Supv Position #	:	Supv Banne	er ID #:	_	
Check Dist:	Distr	ct/Div:	Locati	on ID:	
Begin Date:	End	d Date:			
Position #:		Suffix:	Title:		
FTE:	_ Hours per Pay:	Semi-monthly	√ Rate □ \$	_ Monthly Rate □ \$	
Total Semester	Salary: \$	Annual Salar	y: \$	FOP:	
			nt to be paid to the employ ng semesters and summer Fitle*		Section #
Course 1					
Course 2					
Course 3				_	
			Total FT	E	
	*If 5000 lev	el or above, please	attach course description	ı	
	oyment □ (Instructorssor, or Visiting Profe		r, Associate Professor, or I	Professor or Visiting Ass	istant Professor, Visiting
	PZRFAC2 for employ sted above.	ment in Banner for o	dates beginning July 1, 200	06 to present. Highlight	all assignments with the
CV and transcr	ripts attached □ (R	equired for all new h	ires and rehires with a serv	vice break of 3 years or g	reater.)
Approval Signa	atures:				
Department			Dean		
Provost			_		
		Prepared by: _		Phone	#:
Notify EPAF A	pproval GID:		_		Revised 8/2013

Instructions for PROV 200 Form: This form is used to approve hiring individuals without a search to teach courses each semester. This form is used for new hires, rehires of part-time 9 month or 12 month faculty, and Administrative Professional employees. Complete this form and submit to the Provost Office for approval. New Hires: Attach all required hiring paperwork according to the EPAF New Hire checklist and forward to Human Resources. Rehires or Current Employees: Complete an EPAF. Note in comment section that an approved PROV 200 will be forwarded to Human Resources. Also note if a UPO-10 or HR-12 has been approved and sent to Human Resources for all full time employees.

Name: as it appears on the Social Security Card.

Home Departmental Organization: a six (6) digit number assigned by finance.

Check Distribution: an alpha/numeric code where the check advice will be sent.

District/Division: a three (3) digit number for the division this department reports to.

Location ID: a six (6) digit number to show the location of the job. This is used for mail outs.

Begin date: the date the job begins (date should be August 16, January 1, or May 16).

End date: the date the job is expected to end (date must be December 31, May 15, or August 15).

Position number: the departmental position the employee is assigned to for this assignment. Z job position number is ZJ, the timekeeping location and a zero (example: ZJ4240)

Suffix: a two (2) digit number.

Title: the title given the employee if different from the Position title. If current employee, list current title

FTE: Percent of time of the appointment approved by Provost Office

Hours Per Pay: Hours in the month times FTE for which the employee will be paid

Example: $173.33 \times 50\% = 86.67 \text{ (monthly)}$ Example: $86.67 \times 50\% = 43.34 \text{ (semi-monthly)}$

Semi-Monthly Rate: the actual amount the employee will be paid for each payroll period.

Monthly Rate: the actual amount the employee will be paid for the month.

Total Semester Salary: the actual amount the employee will be paid for the entire semester.

Annual Salary: Calculate semi-monthly annual salary as follows:

Fall semester: amount approved divided by 9 payroll periods times 18. **Spring semester**: amount approved divided by 9 payroll periods times 18.

Summer Term: amount approved divided by number of pay periods to be paid times six (6).

Approval signatures: signatures from the Department, Dean, and Provost offices.

 $\label{eq:Date Prepared: Date Prepared: Date Prepared: The date the form was prepared.}$

Prepared by: the name of the person who prepared the form.

Phone number: the number where the person who prepared the form can be reached.

Notify EPAF Approval GID: Global ID of the person to receive the FYI notification that the EPAF has been applied to the system.

Ex: mouseml