Print Form

Reset Form

Job #:

## Form 5: Request to Offer Appointment Temporary Faculty Unit Employees

Please attach Reference Check Information for Recommended Candidate (to be completed by Search Committee)

Candidate Recommended:	
Position:	Department:
Reason for Selection:	
Address:	E-mail:
Contact Phone #:	Alternate Phone #:
Highest Degree Earned: Date	: Institution:
Terminal Degree or License Required: (Y/N/NA) Date	Required by: Major:
HSU Mentor's Name:	one Ext: E-mail:
Complete the information below once verbal offer has been accepted by the candidate and forward form to APS.	
FTSR: Timebase: Monthly Salary:	Job Code: Range:
Start Date: AY 12-Month 10-Month - Specify Months Off	
HSU Office Assignment: Working Title:	
Other:	
Temporary Faculty Unit Employees are generally NOT eligible for moving expenses. Contact APS if you have questions regarding this policy.	
Department Chair (Instructional Faculty Only)	Date
College Dean/Library Dean/Director of CAPS/Director of Athlet	ics Date
Compliance Review by:	
Senior AVP for Faculty Affairs & Human Resources	Date
Approved by:	
Sr. AVP for Faculty Affairs & HR/VP Student Affairs ( <i>Counselors</i> )/ Pres	dent ( <i>Coaches</i> ) Date

## **Please Return Original to Academic Personnel Services**

**Distribution:** Original to APS for routing. Approved copies distributed electronically to College Dean/Library Dean/Director of CAPS/Director of Athletics, VPSA (for Counselor positions only)/President (for Coach positions only), and OAA Budget (for Academic Positions only).

Form 5: Request to Offer Appointment (Temporary Faculty Unit Employees)