

OFFER OF APPOINTMENT
Form 5
STAFF/ADMINISTRATIVE

Job # _____

To be used only if
salary is within 5% of
minimum of range

Candidate Recommended: _____ Start Date: _____

Position: _____ Department: _____

Salary: _____ Time Base: _____ Pay Plan: _____ Date(s) Off: _____
(If 10/12 or 11/12 Pay Plan)

Dept. Chair/Lead: _____ Dept. Chair/Lead Title: _____

Appropriate Admin: _____ Appropriate Admin's Title: _____

Will employee supervise others? YES NO

Please notify the following people when the Appointment Letter has been signed and returned to APSHR:

Hiring Authority or Proxy Name: _____ Email: _____

Department Contact Name: _____ Email: _____

Reason for selection and justification for higher salary up to 5% (if applicable)

Hiring Authority (Person Making Hiring Decision)

Date