



Administrative Professional Recommend to Hire

EASTERN OREGON
UNIVERSITY

To: Vice President/President: _____ From: _____

Employee Name: _____ ID Number: _____

Position Title: _____ College/Department: _____

Effective Date: _____

Provisional Position: Yes ___ No ___ If provisional, include employment end date _____

Circle justification

Short - term workload

Emergency

Employee on leave

Hours worked < 20 ___ or

Hours worked >20 ___ or

Variable _____

Position Number: _____ New Position: ___ Yes ___ No, Name of person replacing _____

Index _____ Amount or Percent: _____

Index _____ Amount or Percent: _____

Index _____ Amount or Percent: _____

Time Sheet / Leave Approver:

Name: _____ ID Number: _____

12 Month Salary Rate _____ **Exempt** _____ **Non-Exempt** _____

Pay Band _____

Pay Plan: Managerial _____ Clerical & Trade _____ Athletics _____

Assigned FTE _____

Salary \$ _____

Hourly rate, if applicable \$ _____

Approval: Hiring Manager _____ **Vice President/President** _____

Budget Office _____

Process Workflow: 1. Hiring Manager (Completes Form) 2. Vice President/President 3. Budget 4. Human Resources

Office use only:

Calculated FTE _____

Appointment Salary _____

Leave Category _____

Benefits Category _____