San José State
UNIVERSITY
FOUNDATION

Faculty Appointment Form

(Use FHR1 for Non-Academic appointment)

MTI

For H.R. Use Only

Pay Code	
Job Code	
W/C Code	
Payroll Code	
F/B Code	
In BT	

Federal law requires Human Resources to attest, under penalty of perjury, that each new hire's (1) identity and (2) legal authority to work has been examined and verified. New employees must report within 3 business days of hire to the Foundation Human Resources with the appropriate documentation.

Check One	New Hire	New Account or Acct Change	Reappointment	Rehire	Change of Position	One Time Pay	Separation*	Other

NAME: _____
Last First M.I.

Social Security No. _____

Street Address: _____

City: _____ State & Zip: _____

Email: _____

Home Phone: ( ) _____

U.S. Citizen: Yes ☐ No ☐ Type of Visa: _____

Permanent Address (if different from above)

_____

Supervisor: _____

Work Location: _____

Work Phone: _____

Have you previously worked for the Foundation?

☐ Yes ☐ No If yes, when? _____

Do you have any relatives working for the Foundation?

☐ Yes ☐ No If yes, whom? _____

ANTICIPATED APPOINTMENT PERIOD

AY/SEM _____ Intersession _____ Summer _____ Other _____

Start: _____ End: _____

(Maximum one year or termination of funding, if earlier)

☐ Hourly Rate: $ _____

%Time of Regular Hours: _____ %Time of Overload Hours: _____

Job/Working Title: _____

Pay Classification: _____

Account No.: _____

Program / Project Title: _____

For Information concerning working conditions/benefits, refer to the FDN Employee Handbook or call FDN Human Resources.

Employee Signature	Date
Faculty Affairs Signature	Date
Continuing Ed. Signature	Date
Foundation HR Signature	Date

FOUNDATION EMPLOYEES ARE NOT STATE EMPLOYEES. Foundation employees who work on projects or programs funded by grants, contracts, gifts or fees are considered temporary employees under the meaning of Section 89900(c) of the California State Education Code.

RECOMMENDATIONS

The recruitment and appointment of this person is in conformity with affirmative action policy and/or this appointment conforms to Chancellor's Office policy on overload as specified in FSA79-30.

Project Director/
Program Head: _____
Signature Date

Dept. Chair: _____
Signature Date

School Dean: _____
Signature Date

EMPLOYMENT ALLOCATION

(Must be completed by the Department)

1. SJSU _____%
2. CONTINUING EDUCATION _____%
3. SJSU FOUNDATION _____%
   a. Straight Time (Fdn. Employee) _____%
   b. Reimbursed Time (Univ. Employee) _____%
   c. Overload (25% max.) _____% _____ hrs
4. TOTAL ALLOCATION OF TIME _____%

Reason for separation: _____

_____

_____

_____

_____

Date separation is effective: _____

Last date worked: _____

FHR2: 7/04

SEND TO ~~SJSU FDN. HUMAN RESOURCES DEPT.~~ **MTI**-210 N.4th St,4th Fl
San Jose, CA 95112

White/HR Canary/Fdn. Analyst Pink/HR Gold/Project Director