



EMPLOYEE ASSIGNMENT FORM ADDENDUM FOR ADDITIONAL JOBS

Hire Date: (dd/mmm/yy)	Rehire? ___Y ___N	Prev. Vested in Retirement? ___Y ___N If no, Prior Service Credit? ___Yes ___No ___N/A	If Yes to Service Credit, indicate: ___ SUNY ___ Other College/University ___ Research Organization
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PEOPLE DATA

Last Name:	First Name:	Employee Number:
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ASSIGNMENT

Location:	Status: ___ Active Assignment ___ SUNY Extra Service
Assignment Category: ___ Exempt Regular ___ Hourly ___ Nonexempt Regular	
Employee Category: ___ Adm ___ SP ___ Agy	
Salary Basis:	FTE:
Appointment Type:	

SALARY

Proposal (Effective) Date: (dd/mmm/yy)	Rate ___ or Annual Salary ___ or Period Salary ___
Approved: X	Reason:
Retro Required? ___ No ___ Yes: Begin Date: (dd/mmm/yy)	Retro End Date: (dd/mmm/yy)

ELEMENT INFORMATION

Reg Salary Two ___ Period Salary Two ___ Reg Wages One ___ Reg Wages Two ___ Reg Wages Three ___			
Job Name:	Grade:	Organization:	Supervisor:
Work Region:			
Input by:		Date:	

NAME:	Employee #:
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LABOR DISTRIBUTION

<u>Schedule Hierarchy</u>		___ Assignment		___ Element			
Schedule Line Changes							
Project	Task	Award	Organization	Expenditure Type	LD Start Date	LD End Date	%

Input by:	Date:
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APPROVALS

This assignment is consistent with sponsored program terms and conditions and with Research Foundation policies.

Project Director/Co-Project Director:

(Signature)

(Date)

Funds are in the account for this assignment.

Operations Manager:

(Signature)

(Date)

Additional Campus Signatures as Required:

(Signature)

(Date)

(Signature)

(Date)