

NEW APPOINTMENT TO TENURE



COLUMBIA UNIVERSITY NOMINATION FORM

EFF. DATE **7/1/2012** ACTION **HIR** REASON **NEW**
 1. **7/1/2012**
 2.
 3.
 POSITION OF TOTAL POSITION(S)

DATE SUBMITTED **6/30/2012**

NAME Prefix **Prof — Professor** Suffix
 Last, First Middle
Washington, George
 OFF. PHONE **212-123-4567** SOCIAL SECURITY NO. **123-45-6789**
 RES. PHONE **646-123-4567** ADMIN. DEPT. NAME **History**
 FAX **212-123-4567** ADMIN. DEPT. CODE **3120000**
 WORK LOCATION **1 — Morningside**

OFFICE ADDRESS MAILING ADDRESS (Current)
Building Name
 MAIL CD. ##### CHK SEQ CD **31201**
 CITY STATE CITY STATE
 COUNTRY ZIP COUNTRY ZIP

HOME ADDRESS (Permanent)
123 Main Street
 CITY **New City** STATE **NY** COUNTRY ZIP **12345**

PERSONAL WORK ELIGIBILITY U.S. CITIZEN ☒ YES ☐ NO
 SEX ☒ Male ☐ Female BIRTH DATE **04/20/1963** VISA TYPE
 ETHNICITY / RACE* **2 — Black** EXPIRATION DATE
 MARITAL STATUS* **Single** MIL. RPT. STATUS* PERM RES REG # A:
 MARITAL STATUS DATE

EDUCATION
 HIGHEST DEGREE **J — Doctorate (Academic) Ph.D** INSTITUTION **Harvard University** YEAR **2000**
 DEGREE **I — Master's Level Degree MS** INSTITUTION **University of Paris (France)** YEAR **1996**
 DEGREE **G — Bachelor's Level Degree BS** INSTITUTION **SUNY, Stony Brook** YEAR **1992**
 DEGREE INSTITUTION YEAR
 DEGREE INSTITUTION YEAR

TENURE INFORMATION COMPLETE UNIVERSITY TITLE
☒ TENURE BEGIN DATE **7/1/2012** **Professor of History**
☐ TENURE OF TITLE BEGIN DATE **INDICATE COMPLETE TITLE !!**
☐ NON TENURED - ON TRACK **(PLEASE SEE JOB AID IN APPENDIX)**
☐ OTHER NON TENURED

POSITION / SALARY INFORMATION POSITION NUMBER **Add Position Number**
 POS. DEPT. CODE **3120000** COMP. RATE \$ **\$100,000** ANNUAL RATE \$ **\$100,000**
 POS. DEPT. NAME **History** SALARY TYPE ☐ CNTRCT Period Salary (with Appt./ Base Salary End Date)
☒ NAANL Annual Salary (without Appt./ Base Salary End Date)
 TITLE **Professor** APPT. / COMP. RATE EFF. DATE **7/1/2012**
 POSITION ENTRY DATE **7/1/2012** APPT. / COMP. RATE END DATE
 APPT. TYPE* FT / PT **Full Time** HOURS / WEEK
 BARG. UNIT % EFFORT

LEAVE OF ABSENCE
 LEAVE ACTION LEAVE REASON
 LEAVE BEGIN DATE LEAVE END DATE PARTIAL PAY ☐ YES ☐ NO

COMMENTS:

AUTHORIZATIONS / APPROVALS
 NAME DATE NAME DATE
 CHAIR / DIRECTOR PROVOST
 NAME DATE NAME DATE
 VP / DEAN HRPC

PLEASE TYPE or USE COLORED INK
 (DO NOT USE BLACK INK OR PENCIL)

NEW APPOINTMENT TO TENURE - NAMED PROFESSORSHIP



COLUMBIA UNIVERSITY NOMINATION FORM

EFF. DATE	ACTION	REASON
1. 7/1/2012	HIR	NEW
2.		
3.		

DATE SUBMITTED 6/30/2012

NAME	Prefix Prof — Professor	Suffix	OFF. PHONE 212-123-4567	SOCIAL SECURITY NO. 123-45-6789
	Last, First Middle		RES. PHONE 646-123-4567	ADMIN. DEPT. NAME History
			FAX 212-123-4567	ADMIN. DEPT. CODE 3120000
	Franklin, Benjamin		WORK LOCATION 1 — Morningside	

OFFICE ADDRESS	MAILING ADDRESS (Current)
### Building Name	
MAIL CD. ###	CHK SEQ CD 31201
CITY	STATE
COUNTRY	ZIP
HOME ADDRESS (Permanent)	
### Main Street	
CITY New City	STATE NY COUNTRY ZIP 12345

PERSONAL	WORK ELIGIBILITY	U.S. CITIZEN	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female BIRTH DATE 04/21/1964	VISA TYPE		
ETHNICITY / RACE* 1 — White	EXPIRATION DATE		
MARITAL STATUS* Single MIL. RPT. STATUS*	PERM RES REG # A:		
MARITAL STATUS DATE			

EDUCATION	
HIGHEST DEGREE J — Doctorate (Academic) Ph.D INSTITUTION Harvard University YEAR 1999	
DEGREE I — Master's Level Degree MA INSTITUTION University of Paris (France) YEAR 1995	
DEGREE G — Bachelor's Level Degree BA INSTITUTION University of Pennsylvania YEAR 1991	
DEGREE INSTITUTION YEAR	
DEGREE INSTITUTION YEAR	

TENURE INFORMATION	COMPLETE UNIVERSITY TITLE
<input checked="" type="checkbox"/> TENURE BEGIN DATE 7/1/2012	Enter appropriate title as per title guide (e.g., Ethan Allen Professor of American History)
<input type="checkbox"/> TENURE OF TITLE BEGIN DATE	
<input type="checkbox"/> NON TENURED - ON TRACK	
<input type="checkbox"/> OTHER NON TENURED	

POSITION / SALARY INFORMATION	POSITION NUMBER	Add Position #
POS. DEPT. CODE 3120000	COMP. RATE \$ \$100,000	ANNUAL RATE \$ \$100,000
POS. DEPT. NAME History	SALARY TYPE <input type="checkbox"/> CNTRCT Period Salary (with Appt./ Base Salary End Date)	
TITLE Named Professor	<input checked="" type="checkbox"/> NAANL Annual Salary (without Appt./ Base Salary End Date)	
POSITION ENTRY DATE 07/01/2012	APPT. / COMP. RATE EFF. DATE 7/1/2012	
APPT. TYPE*	APPT. / COMP. RATE END DATE	
	FT / PT Full Time HOURS / WEEK	
BARG. UNIT	% EFFORT	

LEAVE OF ABSENCE	
LEAVE ACTION	LEAVE REASON
LEAVE BEGIN DATE	LEAVE END DATE PARTIAL PAY <input type="checkbox"/> YES <input type="checkbox"/> NO

COMMENTS:

AUTHORIZATIONS / APPROVALS	
NAME DATE	NAME DATE
CHAIR / DIRECTOR	PROVOST
NAME DATE	NAME DATE
VP / DEAN	HRPC

PLEASE TYPE or USE COLORED INK

FULL-TIME NON-TENURED APPOINTMENT



COLUMBIA UNIVERSITY NOMINATION FORM

EFF. DATE **01/01/2012** ACTION **HIR** REASON **NEW**
 1. _____
 2. _____
 3. _____
 POSITION _____ OF TOTAL _____ POSITION(S) _____

DATE SUBMITTED **12/31/201**

NAME Prefix Prof -- Professor Suffix _____ Last, First Middle Hawthorne, Nathaniel	OFF. PHONE 212-123-4567 RES. PHONE 718-123-4567 FAX 212-123-4567 WORK LOCATION 1 -- Morningside	SOCIAL SECURITY NO. 123-45-6789 ADMIN. DEPT. NAME English ADMIN. DEPT. CODE 3270000
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OFFICE ADDRESS ### Building Name	MAILING ADDRESS (Current)
MAIL CD. #### CHK SEQ CD 32701	
CITY _____ STATE _____	CITY _____ STATE _____
COUNTRY _____ ZIP _____	COUNTRY _____ ZIP _____
HOME ADDRESS (Permanent) ### Main Street, #12B	
CITY New City STATE NY COUNTRY _____ ZIP 12345	

PERSONAL		WORK ELIGIBILITY	U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female BIRTH DATE 5/3/1950		VISA TYPE _____	
ETHNICITY / RACE* 1 -- White		EXPIRATION DATE _____	
MARITAL STATUS* Single MIL. RPT. STATUS* _____		PERM RES REG # A: _____	
MARITAL STATUS DATE _____			

EDUCATION			
HIGHEST DEGREE J -- Doctorate (Academic) Ph.D	INSTITUTION Columbia University	YEAR 1994	
DEGREE I -- Master's Level Degree MA	INSTITUTION SUNY - Albany	YEAR 1990	
DEGREE G -- Bachelor's Level Degree BA	INSTITUTION Trinity College	YEAR 1988	
DEGREE _____	INSTITUTION _____	YEAR _____	
DEGREE _____	INSTITUTION _____	YEAR _____	

TENURE INFORMATION		COMPLETE UNIVERSITY TITLE
<input type="checkbox"/> TENURE BEGIN DATE _____		Visiting Professor of English and Comparative Literature
<input type="checkbox"/> TENURE OF TITLE BEGIN DATE _____		
<input checked="" type="checkbox"/> NON TENURED - ON TRACK		
<input type="checkbox"/> OTHER NON TENURED		

POSITION / SALARY INFORMATION		POSITION NUMBER Add Position #
POS. DEPT. CODE 3270000	COMP. RATE \$ \$32,500	ANNUAL RATE \$ \$65,000
POS. DEPT. NAME English	SALARY TYPE <input checked="" type="checkbox"/> CNTRCT Period Salary (with Appt./ Base Salary End Date)	
TITLE Visiting Professor	<input type="checkbox"/> NAANL Annual Salary (without Appt./ Base Salary End Date)	
POSITION ENTRY DATE 1/1/2012	APPT. / COMP. RATE EFF. DATE 1/1/2012	
APPT. TYPE* _____	APPT. / COMP. RATE END DATE 6/30/2012	
BARG. UNIT _____	FT / PT Full Time	HOURS / WEEK _____
		% EFFORT _____

LEAVE OF ABSENCE	
LEAVE ACTION _____	LEAVE REASON _____
LEAVE BEGIN DATE _____	LEAVE END DATE _____ PARTIAL PAY <input type="checkbox"/> YES <input type="checkbox"/> NO

COMMENTS:

AUTHORIZATIONS / APPROVALS			
NAME _____	DATE _____	NAME _____	DATE _____
CHAIR / DIRECTOR		PROVOST	
NAME _____	DATE _____	NAME _____	DATE _____
VP / DEAN		HRPC	

NEW NON-TENURED APPOINTMENT-NAMED ASSISTANT



COLUMBIA UNIVERSITY NOMINATION FORM

EFF. DATE 1. 7/1/2012 ACTION HIR REASON NEW
2. _____
3. _____
POSITION OF TOTAL POSITION(S)

Professor
DATE SUBMITTED 6/30/2012

NAME Prefix <u>Prof — Professor</u> Suffix _____ Last, First Middle Archimedes, Archie	OFF. PHONE <u>212-123-4567</u> RES. PHONE <u>917-123-4567</u> FAX <u>212-123-4567</u> WORK LOCATION <u>1 — Morningside</u>	SOCIAL SECURITY NO. <u>123-45-6789</u> ADMIN. DEPT. NAME <u>Mathematics</u> ADMIN. DEPT. CODE <u>3780000</u>
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OFFICE ADDRESS ### Building Name	MAILING ADDRESS (Current)
MAIL CD. #### CHK SEQ CD 37801	
CITY _____ STATE _____	CITY _____ STATE _____
COUNTRY _____ ZIP _____	COUNTRY _____ ZIP _____
HOME ADDRESS (Permanent) ### Main Street, #1B	
CITY New City STATE NY COUNTRY _____ ZIP 12345	

PERSONAL	WORK ELIGIBILITY U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female BIRTH DATE <u>4/12/1956</u>	VISA TYPE _____
ETHNICITY / RACE* <u>1 — White</u>	EXPIRATION DATE _____
MARITAL STATUS* <u>Single</u> MIL. RPT. STATUS* _____	PERM RES REG # A: _____
MARITAL STATUS DATE _____	

EDUCATION		
HIGHEST DEGREE <u>J — Doctorate (Academic) Ph.D</u>	INSTITUTION <u>Columbia University</u>	YEAR <u>1982</u>
DEGREE <u>I — Master's Level Degree MA</u>	INSTITUTION <u>Harvard University</u>	YEAR <u>1979</u>
DEGREE <u>G — Bachelor's Level Degree BS</u>	INSTITUTION <u>Southern Illinois University</u>	YEAR <u>1976</u>
DEGREE _____	INSTITUTION _____	YEAR _____
DEGREE _____	INSTITUTION _____	YEAR _____

TENURE INFORMATION	COMPLETE UNIVERSITY TITLE
<input type="checkbox"/> TENURE BEGIN DATE _____	Enter appropriate title as per Title Guide (e. g., Joseph Fels Ritt Assistant Professor of Mathematics)
<input type="checkbox"/> TENURE OF TITLE BEGIN DATE _____	
<input checked="" type="checkbox"/> NON TENURED - ON TRACK	
<input type="checkbox"/> OTHER NON TENURED	

POSITION / SALARY INFORMATION	POSITION NUMBER <u>Add Position #</u>
POS. DEPT. CODE <u>3780000</u>	COMP. RATE \$ <u>\$60,000</u> ANNUAL RATE \$ <u>\$60,000</u>
POS. DEPT. NAME <u>Mathematics</u>	SALARY TYPE <input checked="" type="checkbox"/> CNTRCT Period Salary (with Appt./ Base Salary End Date)
TITLE <u>Named Assistant Professor</u>	<input type="checkbox"/> NAANL Annual Salary (without Appt./ Base Salary End Date)
POSITION ENTRY DATE <u>7/1/2012</u>	APPT. / COMP. RATE EFF. DATE <u>7/1/2012</u>
APPT. TYPE* <u>Presidential</u>	APPT. / COMP. RATE END DATE <u>6/30/2013</u>
BARG. UNIT _____	FT / PT <u>Full Time</u> HOURS / WEEK _____
	% EFFORT _____

LEAVE OF ABSENCE	
LEAVE ACTION _____	LEAVE REASON _____
LEAVE BEGIN DATE _____	LEAVE END DATE _____ PARTIAL PAY <input type="checkbox"/> YES <input type="checkbox"/> NO

COMMENTS:

AUTHORIZATIONS / APPROVALS			
NAME _____	DATE _____	NAME _____	DATE _____
CHAIR / DIRECTOR _____		PROVOST _____	
NAME _____	DATE _____	NAME _____	DATE _____
VP / DEAN _____		HRPC _____	

NEW PART-TIME APPOINTMENT



COLUMBIA UNIVERSITY NOMINATION FORM

EFF. DATE	ACTION	REASON
1. 09/1/2012	HIR	NEW
2. _____	_____	_____
3. _____	_____	_____
POSITION	OF TOTAL	POSITION(S)

DATE SUBMITTED **08/31/2012**

NAME	Prefix Prof — Professor	Suffix _____	OFF. PHONE 212-123-4567	SOCIAL SECURITY NO. 123-45-6789
	Last, First Middle		RES. PHONE 646-123-4567	ADMIN. DEPT. NAME Economics
			FAX 212-123-4567	ADMIN. DEPT. CODE 3060000
	Stewart, Martha		WORK LOCATION 1 — Morningside	

OFFICE ADDRESS ### Building Name	MAILING ADDRESS (Current)
MAIL CD. ####	CHK SEQ CD 30601
CITY _____ STATE _____	CITY _____ STATE _____
COUNTRY _____ ZIP _____	COUNTRY _____ ZIP _____
HOME ADDRESS (Permanent) ### Main Street, #1B	
CITY New City	STATE NY COUNTRY _____ ZIP 12345

PERSONAL	WORK ELIGIBILITY	U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SEX <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	BIRTH DATE 04/20/1958	VISA TYPE _____
ETHNICITY / RACE* 1 — White	EXPIRATION DATE _____	PERM RES REG # A: _____
MARITAL STATUS* Single	MIL. RPT. STATUS* _____	
MARITAL STATUS DATE _____		

EDUCATION		
HIGHEST DEGREE I — Master's Level Degree	MBA INSTITUTION New York University	YEAR 1980
DEGREE G — Bachelor's Level Degree	BS INSTITUTION New York University	YEAR 1977
DEGREE _____	INSTITUTION _____	YEAR _____
DEGREE _____	INSTITUTION _____	YEAR _____
DEGREE _____	INSTITUTION _____	YEAR _____

TENURE INFORMATION	COMPLETE UNIVERSITY TITLE
<input type="checkbox"/> TENURE BEGIN DATE _____	Adjunct Professor of Economics
<input type="checkbox"/> TENURE OF TITLE BEGIN DATE _____	
<input type="checkbox"/> NON TENURED - ON TRACK	
<input checked="" type="checkbox"/> OTHER NON TENURED	

POSITION / SALARY INFORMATION	POSITION NUMBER Add Position #
POS. DEPT. CODE 3060000	COMP. RATE \$ \$20,000 ANNUAL RATE \$ \$26,666.67
POS. DEPT. NAME Economics	SALARY TYPE <input checked="" type="checkbox"/> CNTRCT Period Salary (with Appt./ Base Salary End Date)
TITLE Adjunct Professor	<input type="checkbox"/> NAANL Annual Salary (without Appt./ Base Salary End Date)
POSITION ENTRY DATE 09/1/2012	APPT. / COMP. RATE EFF. DATE 09/1/2012
APPT. TYPE* _____	APPT. / COMP. RATE END DATE 5/31/2013
BARG. UNIT _____	FT / PT Part Time HOURS / WEEK _____
	% EFFORT _____

LEAVE OF ABSENCE	
LEAVE ACTION _____	LEAVE REASON _____
LEAVE BEGIN DATE _____	LEAVE END DATE _____ PARTIAL PAY <input type="checkbox"/> YES <input type="checkbox"/> NO

COMMENTS:

AUTHORIZATIONS / APPROVALS			
NAME _____	DATE _____	NAME _____	DATE _____
CHAIR / DIRECTOR _____		PROVOST _____	
NAME _____	DATE _____	NAME _____	DATE _____
VP / DEAN _____		HRPC _____	

PLEASE TYPE or USE COLORED INK
(DO NOT USE BLACK INK OR PENCIL)

NEW STUDENT APPOINTMENT



COLUMBIA UNIVERSITY NOMINATION FORM

EFF. DATE 1. 9/1/2012 ACTION HIR REASON NEW
2. _____
3. _____
POSITION 1 OF TOTAL 1 POSITION(S)

DATE SUBMITTED 8/31/2012

NAME Prefix Ms — Ms Last, First Middle Daley, Marie
Suffix
OFF. PHONE 212-123-4567 SOCIAL SECURITY NO. 123-45-6789
RES. PHONE 718-123-4567 ADMIN. DEPT. NAME Chemistry
FAX 212-123-4567 ADMIN. DEPT. CODE 3690000
WORK LOCATION 1 — Morningside

OFFICE ADDRESS
Building Name

MAILING ADDRESS (Current)

MAIL CD. #### CHK SEQ CD 36901

CITY STATE

CITY STATE

COUNTRY ZIP

COUNTRY ZIP

HOME ADDRESS (Permanent)

Main Street

CITY New City

STATE NY COUNTRY

ZIP 122345

PERSONAL

SEX ☐ Male ☒ Female BIRTH DATE 5/10/1969

WORK ELIGIBILITY U.S. CITIZEN ☒ YES ☐ NO

ETHNICITY/RACE* 1 — White

VISA TYPE

MARITAL STATUS* Single

MIL. RPT. STATUS*

EXPIRATION DATE

MARITAL STATUS DATE

PERM RES REG # A:

EDUCATION

HIGHEST DEGREE	G — Bachelor's Level Degree	INSTITUTION	YEAR
DEGREE	BS	Columbia University	2000
DEGREE		INSTITUTION	YEAR
DEGREE		INSTITUTION	YEAR
DEGREE		INSTITUTION	YEAR
DEGREE		INSTITUTION	YEAR

TENURE INFORMATION

☐ TENURE BEGIN DATE
☐ TENURE OF TITLE BEGIN DATE
☐ NON TENURED - ON TRACK
☐ OTHER NON TENURED

COMPLETE UNIVERSITY TITLE

NONE

POSITION / SALARY INFORMATION

POSITION NUMBER Add Position #

POS. DEPT. CODE 3690000

COMP. RATE \$ 3,540

ANNUAL RATE \$ 4,720

POS. DEPT. NAME Chemistry

SALARY TYPE ☒ CNTRCT Period Salary (with Appt./ Base Salary End Date)

TITLE Teaching Assistant

☐ NAANL Annual Salary (without Appt./ Base Salary End Date)

POSITION ENTRY DATE 9/1/2012

APPT. / COMP. RATE EFF. DATE 9/1/2012

APPT. TYPE* Secretarial

APPT. / COMP. RATE END DATE 5/31/2013

FT/PT Part Time

HOURS / WEEK

BARG. UNIT

% EFFORT

LEAVE OF ABSENCE

LEAVE ACTION LEAVE REASON

LEAVE BEGIN DATE LEAVE END DATE PARTIAL PAY ☐ YES ☐ NO

COMMENTS:

AUTHORIZATIONS / APPROVALS

NAME	DATE	NAME	DATE
CHAIR / DIRECTOR		PROVOST	
NAME	DATE	NAME	DATE
VP / DEAN		HRPC	

PLEASE TYPE or USE COLORED INK

NEW STUDENT APPOINTMENT WITH VISA



COLUMBIA UNIVERSITY NOMINATION FORM

EFF. DATE 1. 9/1/2012 ACTION HIR REASON NEW
2. _____
3. _____
POSITION 1 OF TOTAL 1 POSITION(S)

DATE SUBMITTED 8/31/2012

NAME	Prefix <u>Ms - Ms</u>	Suffix _____	OFF. PHONE <u>212-123-4567</u>	SOCIAL SECURITY NO. <u>123-45-6789</u>
	Last, First Middle		RES. PHONE <u>718-123-4567</u>	ADMIN. DEPT. NAME <u>Chemistry</u>
			FAX <u>212-123-4567</u>	ADMIN. DEPT. CODE <u>3690000</u>
	<u>Curie, Marie</u>		WORK LOCATION <u>1 - Morningside</u>	

OFFICE ADDRESS ### Building Name	MAILING ADDRESS (Current)
MAIL CD. #####	CHK SEQ CD <u>36901</u>
CITY	STATE
COUNTRY	ZIP
HOME ADDRESS (Permanent) ### Main Street	
CITY <u>New City</u>	STATE <u>NY</u> COUNTRY _____ ZIP <u>122345</u>

PERSONAL	WORK ELIGIBILITY
SEX <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female BIRTH DATE <u>5/10/1970</u>	U.S. CITIZEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
ETHNICITY / RACE* <u>1 - White</u>	VISA TYPE <u>F1</u>
MARITAL STATUS* <u>Single</u> MIL. RPT. STATUS* _____	EXPIRATION DATE <u>5/19/2013</u>
MARITAL STATUS DATE _____	PERM RES REG # A: _____

EDUCATION
HIGHEST DEGREE <u>G - Bachelor's Level Degree</u> INSTITUTION <u>Columbia University</u> YEAR <u>2000</u>
DEGREE _____ INSTITUTION _____ YEAR _____
DEGREE _____ INSTITUTION _____ YEAR _____
DEGREE _____ INSTITUTION _____ YEAR _____
DEGREE _____ INSTITUTION _____ YEAR _____

TENURE INFORMATION	COMPLETE UNIVERSITY TITLE
<input type="checkbox"/> TENURE BEGIN DATE _____	
<input type="checkbox"/> TENURE OF TITLE BEGIN DATE _____	
<input type="checkbox"/> NON TENURED - ON TRACK	
<input type="checkbox"/> OTHER NON TENURED	

POSITION / SALARY INFORMATION	POSITION NUMBER <u>Add Position #</u>
POS. DEPT. CODE <u>3690000</u>	COMP. RATE \$ <u>3,369</u> ANNUAL RATE \$ <u>4,720</u>
POS. DEPT. NAME <u>Chemistry</u>	SALARY TYPE <input checked="" type="checkbox"/> CNTRCT Period Salary (with Appt/ Base Salary End Date)
TITLE <u>Teaching Assistant</u>	<input type="checkbox"/> NAANL Annual Salary (without Appt/ Base Salary End Date)
POSITION ENTRY DATE <u>9/1/2012</u>	APPT. / COMP. RATE EFF. DATE <u>9/1/2012</u>
APPT. TYPE* <u>Secretarial</u>	APPT. / COMP. RATE END DATE <u>5/19/2013</u>
BARG. UNIT	FT/PT <u>Part Time</u> HOURS / WEEK _____
	% EFFORT _____

LEAVE OF ABSENCE
LEAVE ACTION _____ LEAVE REASON _____
LEAVE BEGIN DATE _____ LEAVE END DATE _____ PARTIAL PAY <input type="checkbox"/> YES <input type="checkbox"/> NO

COMMENTS:

AUTHORIZATIONS / APPROVALS	
NAME _____ DATE _____	NAME _____ DATE _____
CHAIR / DIRECTOR	PROVOST
NAME _____ DATE _____	NAME _____ DATE _____
VP / DEAN	HRPC