# University Employee Appointment Form

**NEW TOWER EMPLOYEES MAY NOT WORK UNTIL THEY HAVE BEEN AUTHORIZED BY TOWER HUMAN RESOURCES.**

Federal law requires Tower Human Resources to attest, under penalty of perjury, that new hire’s (1) identity and (2) legal authority to work has been examined and verified. Tower Foundation employees are not employees of the state. Employees who work on Tower Foundation projects are considered temporary employees under the California State Education Code Section 89900(c).

**QUESTIONS? CALL (408) 924-1127**

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<tr>
<th>Check</th>
<th>New Hire</th>
<th>New Account or Account Change</th>
<th>Reappointment or Rehire</th>
<th>One-Time Pay</th>
<th>Other</th>
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**Emplacement Allocation**

1. SJSU ____________________%
2. CONTINUING EDUCATION ________%
3. TOWER FOUNDATION ________%
   - Straight Time (Tower Foundation) ________%
   - Reimbursed Time (Univ. Employee) ________%
   - Overload ________% ________hrs ________%
4. SJSU RESEARCH FOUNDATION ________%
   - Straight Time (Tower Foundation) ________%
   - Reimbursed Time (Univ. Employee) ________%
   - Overload (25% maximum) ________%
5. TOTAL ALLOCATION OF TIME ________%

**Signatures below corroborate any time allocation listed above:**

- SJSU Faculty Affairs Signature ____________________ Date _____________
- Project Name, Scope, and Brief Description
  - Project Name: ____________________
  - Scope: ____________________________________________________________________________
  - Description: ________________________________________________________________________
  - COO Approval ____________________ Date _____________
- AUTHORIZATION
  - 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.
- Employee Signature ____________________ Date _____________
- University Classification: ____________________
- Account No.: ____________________
- Account Name: ____________________
- Time Card Approver: ____________________
- Department Chair’s Signature ____________________ Date _____________
- Account Holder’s Signature ____________________ Date _____________
- SJSU HR Signature (Non-Faculty only) ____________________ Date _____________
- Tower HR Signature ____________________ Date _____________
- Send Original to Tower Foundation Human Resources, Clark Hall, Suite 300, ext. zip 0183