University Employee Appointment Form

Federal law requires the 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. New employees must report within 3 business days of hire the Tower Foundation Human Resources with the appropriate documentation. **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).**

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

EMPLOYEE INFORMATION

Social Security No._____

Name: _____
Last First M.I.

Date of Birth:_____Gender_____

Home Address:_____

City: _____ State & Zip: _____

Email: _____

Home Phone: ( ) _____

U.S. Citizen: Yes ☐ No ☐ If No, type of Visa: _____

Permanent Address (if different from above)

_____

Supervisor: _____

Work Location: _____

Work Phone: _____

Have you previously worked for the Tower Foundation?

Yes ☐ No ☐ If yes, when?_____

Do you have any relatives working for the Tower Foundation?

Yes ☐ No ☐ If yes, whom? _____

ANTICIPATED APPOINTMENT PERIOD

☐ AY/SEM ☐ Intersession ☐ Summer ☐ Other

Start: _____ End:_____

(Maximum one year or availability of funds)

Rate: $ _____

Hourly ☐ Monthly ☐ One Time ☐

Univ. Classification _____

Account No.: _____

Account Title: _____

Employee Signature Date

▶

Tower HR Signature Date

▶

EMPLOYMENT ALLOCATION

1. SJSU _____%
2. CONTINUING EDUCATION _____%
3. TOWER FOUNDATION _____%

Itemize the % for Tower Foundation by type of time:

a. Straight Time (Tower Foundation) _____%

b. Reimbursed Time (Univ. Employee) _____%

c. Overload _____% _____ hrs

4. SJSU RESEARCH FOUNDATION _____%

Itemize the % for Research Foundation by type

a. Straight Time (Research Foundation) _____%

b. Reimbursed Time (Univ. Employee) _____%

c. Overload (25% maximum) _____%

5. TOTAL ALLOCATION OF TIME _____%

Signature below corroborate any Time Allocation listed above:

SJSU Faculty Affairs Signature Date

▶

SEPARATION

Complete if indicated above

Reason for separation: _____

_____

Date separation is effective: _____

Last date worked: _____

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.

Account Holder's Signature Date

▶

Department Chair's Signature Date

▶

Dean's Signature Date

▶

Tower Foundation Human Resources Use Only

Pay Code_____ Fringe Benefit Code_____ Job Code_____ Worker's Comp Code_____

Send Original to Tower Foundation Human Resources, Clark Hall 3rd Floor (University Advancement), ext zip 0183

SAN JOSÉ STATE UNIVERSITY | TOWER FOUNDATION

Rev 10/08