

Instructions

After consultation with Human Resources or Faculty Affairs regarding the employment of a Special Consultant, use this form to request payment.

- Secure Appropriate Administrator(s) signature.
- If this Special Consultant is a current Unit 3 or Unit 11 employee, route this form to Faculty Affairs, 0021 for authorization.
- Submit this form to Human Resources,0046.

Special Consultant Information

Name:	SJSU ID: (If current faculty, staff or student)
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Position Information

Position Number:	
Department Name:	Department ID:
Reason for Appointment/Comments:	
Pay Period Month and Year:	

Dates Worked:									

Total Days Worked =	X Daily Rate	= Total \$
Note: Consultants are paid a daily rate. No partial day increments or hours are allowed.		

Authorization

I certify that I have authorized this work and I verify that the days worked are as stated above.

Administrator Name:
Administrator Signature:
Date:

Department Contact:	Phone:
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This section for Human Resources/Faculty Affairs Use Only

Faculty Affairs Approval:	Date:
Workforce Planning Approval:	Date: