



Hiring Document for Non-FTE/Non-Student Positions

Semi-Amt \$ _____
 Override \$ _____
 Total \$ _____

Type of Position: _____

To Be Completed by Department

USC ID:		Name: (Last, First, Middle)							
Class:		Slot:		Eff. Date:		Title:			
Salary:			Hourly Rate:		Part-time/Full-time: (P/F)			Basis:	
Dept. Name:				Dept. No.:			Campus Phone:		Ext.:
EE Primary Email:				Job Location/Building:				Room No.:	
Supervisor Name:							Supervisor Class/Slot:		
Appointment Dates:					through		Expected Earnings for the Appointment:		
Check Dist.:			Timecard Dist.:				ADept. No.:		
Timecard:		Turnaround:		Voucher:		Hours	Faculty	Staff/Faculty Exceptions	
If Dual Employment, Provide Primary Home Department or State agency:							Total Crdt. Hrs.		
Provide the Number of Hours Scheduled/Worked (Refer to Administrator ACA FAQ's for employer fringe liability information):									
If Other Assignments Exist Within the University, Provide the Department Name:							Hrs. Per Wk.		
Provide the Number of Hours Scheduled/Worked (Refer to Administrator ACA FAQ's for employer fringe liability information):							Hrs. Per Appt.		

Accounting Information **Payroll Use Only**

Dept.	Fund	Obj. Class	Analytical	FV	FSO	C	Percent or Amt.

Description of Job Duties (if teaching, list courses):

Permanent Mailing Address:

 Street or Box No. Apt. No. City State Zip

To Be Completed by Division of Human Resources/Payroll

Temp. Job Class:		SOC:		Title:		EE Type:		Campus Type:		Work County:
Primary/Secondary:		TTV:	FLSA:		Faculty/Staff:		OR: \$		(+ / -)	
Withholding: FIT:		SIT:	FICA:	Retirement:				PORS:		
Insurance Eligible:		Stability Period:		Leave Accrual Date:		Comments:				

Signatures	Dates	Signatures	Dates
Dept./Campus:		Payroll:	
		ISFS:	
Salary Administration:		Contract/Grant:	