

Andrews University

Recommendation for Appointment Form

Employee Type:	<input type="radio"/> New Hire	<input type="radio"/> Current Employee	<input type="radio"/> Rehire
Last Name:	First Name:	ID:	

New/Rehires ONLY	Highest Degree:		SSN:
	Home Address:		City: State/Zip:
	Phone (Work):	(Home/Cell):	Email:
	Does individual hold SDA Ordained/Licensed Minister Credentials? <input type="radio"/> Yes <input type="radio"/> No		
	U.S. Citizen/Permanent Resident: <input type="radio"/> Yes; <input type="radio"/> No (If No, what Visa status does/will applicant hold _____)		

Current Employee ONLY (check all that apply)	Appointment type:	Position Adjustment:
	<input type="radio"/> Hourly to Salary <input type="radio"/> New Budget <input type="radio"/> Replacing Budget FTE _____ (Name of outgoing employee: _____)	<input type="radio"/> Change in Rank <input type="radio"/> Change in Title <input type="radio"/> Change in Level and/or Step <input type="radio"/> Change in Remuneration % <input type="radio"/> Change in Salary

APPOINTMENT INFORMATION

Department Hiring:		Tenured: <input type="radio"/> Yes <input type="radio"/> No	
Recommended Rank:		Recommended Title (expertise):	
Recommended effective date of action: ____/____/____ (mm/dd/yyyy)		Amount Budgeted \$	
Recommended Level and Step:		Remuneration %:	
Annual Salary Rate \$			
<input type="radio"/> FA (90-100%) <input type="radio"/> FF (90-100%) <input type="radio"/> FT (75-89%) <input type="radio"/> FP (50-74%) <input type="radio"/> AF (75-100%) <input type="radio"/> AP (50-74%) <input type="radio"/> SA (75-100%) <input type="radio"/> SF (75-100%) <input type="radio"/> SP (50-74%)			
Complete this box only for NEW/REHIREES (Please check one)		<input type="radio"/> New Budget <input type="radio"/> Replacing Budget FTE _____ (Name of outgoing employee: _____)	
Account # to Charge Salary	_____ _____ FUND ORGN ACCT PROG ACTIVITY %		

Special circumstances applicable? Yes No (If Yes, use the space provided below or attach a memo)

APPROVALS	First Level Supervisor's Signature:	Date:
	Next Level Supervisor's Signature:	Date:
	Vice President/Provost's Signature:	Date:
	Controller Signature:	Date:
	HR Director Signature:	Date:

Human Resources Use Only

I-9 Received Date: _____ <input type="radio"/> Received (US Citizen/PR) <input type="radio"/> Temp (Visa Expire: _____) Hire Letter completed: _____ Financial Clearance: _____	Parsonage applicable (see Ministerial Credential above): <input type="radio"/> Yes <input type="radio"/> No Position #: _____ Grade: _____
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