



# Exception Hiring Authorization Form

New Hire
  Re-Hire
  Separation

\*Employee Name \_\_\_\_\_ \*ADP Dept ID \_\_\_\_\_

\*Home Department \_\_\_\_\_ \*Effective Date: \_\_\_\_\_

\*Reports to: \_\_\_\_\_

\*Please give a brief description of work to be performed: \_\_\_\_\_

If separation, give brief explanation why: \_\_\_\_\_

\* - denotes required field. Request will not be processed without this information

**Occasional Worker** - Occasional workers are paid via AGS. Separate paperwork is required to process payment.

Pay Frequency: \_\_\_\_\_ Expected Duration of Assignment: \_\_\_\_\_

**Multi-Incumbent Temporary Hire**

HRMS Position No. \_\_\_\_\_ e-Time approver (if different): \_\_\_\_\_

Pay Rate: \_\_\_\_\_

**Non-Paid Affiliate**

Expected Duration of Assignment: \_\_\_\_\_

**Continuing Education Instructor**

Comments: \_\_\_\_\_

**Approvals**

Supervisor: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Budget Office: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**HR Use Only** Comments: \_\_\_\_\_

Posn # \_\_\_\_\_ Assigned by: \_\_\_\_\_ Date Assigned: \_\_\_\_\_ Emplid \_\_\_\_\_ Entered by: \_\_\_\_\_ Date Entered: \_\_\_\_\_