EMPLOYMENT CONTINUATION FORM

TO BE COMPLETED BY EMPLOYEE:

Name _____
Last First MI

Social Security Number _____/_____/_____

Home Address _____
Street City State Zip

Home Phone # _____ IS THIS ADDRESS AND/OR PHONE NUMBER NEW? YES NO (circle one)

Please read and sign: I understand that this position is temporary for the period indicated. As a temporary employee, I understand that I am not eligible for any benefits, unless otherwise indicated. UMass Dartmouth expressly reserves the right to discontinue this employment at any time without prior notice. In the event of such discontinuance, you shall receive compensation for work performed to date.

_____
Signature of Temporary Employee Date

TO BE COMPLETED BY THE DEPARTMENT HEAD/CHAIRPERSON:

Note: Temporary Positions are authorized on a fiscal year basis.

EMPL ID _____ Record #_____

Title of position _____ Department_____

Continuation Start Date _____ End Date _____

Bi-Weekly/Hourly rate _____ Hours per week _____

Is this an increase in salary? YES NO Is this an increase in hours/week? YES NO

NOTE: IF YES TO EITHER QUESTION-ATTACH JUSTIFICATION

$ Amount Allocated Through June 30th $_____ HR Account Code _____

$ Amount Allocated From July 1st To Appt End Date $_____

Total $ Amount Allocated For Appt $_____

_____
Department Head/Chairperson Signature Date

Approval: Dean of College (if applicable) _____ Date _____

Approval: Division Head _____ Date _____

TO BE COMPLETED BY HUMAN RESOURCES:

Job Code:

HH Funds
- ☐HH0100 Accountant
- ☐HH0300 Information Tech Professional
- ☐HH0800 Artists
- ☐HH1200 Engineers
- ☐HH1400 Health & Safety Experts
- ☐HH1600 Researchers/Post Doc
- ☐HH1900 Management Consultant
- ☐HH2300 Program Coordinators

Workgroup: ☐HHSUBSAL ☐HHSUBPOS

JJ Funds
- ☐HJ0400 Art Models
- ☐HJ0500 Athletic Officials
- ☐HJ2000 Guides/Drivers
- ☐HJ2500 Laboratory Services
- ☐HJ3300 Photographic Services
- ☐HJ4000 Security Services
- ☐HJ4600 Temp Clerical Services
- ☐HJ5000 Instructor/Lecturer Trainer
- ☐HJ5800 Librarians/Archivists
- ☐HJ6000 Licensed Tradespeople
- ☐HJ6109 Departmental Assistant

Workgroup: ☐JJSUBSAL ☐JJSUBPOS

Comments_____

HR _____Date_____

Payroll _____Date_____

Fiscal _____Date_____

Mail Drop_____