



TEMPORARY EMPLOYMENT AUTHORIZATION

Name: _____ WSU ID: _____
WSU Student: ☐ YES ☐ NO If Yes, current credits enrolled: _____
Appointment Start Date: _____ Appointment End Date: _____
Work Days/Hours: _____ Overtime Eligible: ☐ YES ☐ NO
Total Hours or Total \$ Amount to be Worked: _____ Hourly Rate: _____
Budget/Project No: _____ Position Number: _____

Detailed Description of Duties (job summary):

Benefit Eligibility:

1. Do you anticipate the employee will be appointed for six months or more?
☐ YES ☐ NO
2. Anticipated hours of work per week:
☐ 0-19
☐ 20-29
☐ 30-40
3. Is it anticipated the employee will work 8 or more hours in each month of the appointment?
☐ YES ☐ NO
4. Will this be a seasonally recurring appointment?
☐ YES ☐ NO
5. Will the employee be moving from student to non-student status through the calendar year?
☐ YES ☐ NO
6. If this employee is not a U.S. citizen, what is their country of origin? _____

Qualifications Required (must be filled out for new position):

It is the department's responsibility to inform new hourly staff to see the Payroll Office to complete I-9 and other new hire paperwork on or before the start date.

NOTE: The WSUTC Temporary Employment Authorization is only to be used for instructional hourly appointments, student's hourly appointments, or hourly staff on non-state funded budget accounts. To hire hourly staff on state funds you must complete a WSUTC Position Request Form.

Supervisor Signature: _____ Date: _____

Budget Authorization Signature: _____ Date: _____

Payroll Office Use Only

Title: _____

Code: _____