EASTERN ILLINOIS UNIVERSITY Personnel Authorization Request (PAR) Establish and/or Fill a Position

| CHECK ALL THAT APP | LY | | | Fiscal Year |
|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------|------------------------|
| Establish a New Posit Replace an Existing F | | | | |
| Permanent Temporary | | oport Prof. (ASP) ative & Professior ice | Part-time | 100% % |
| Position Title Position Number Beginning Date | End | Pos. Class (NBAPOSN) Ending Date (Write "on-going" if the position has no scheduled end date) | | |
| | | (Write "on-goi | ng" if the position has r | no scheduled end date) |
| Months of Employme | nt Per Year | Job: FTE \$ _ | | |
| Hourly Rate \$ / hour Mor | | Monthly Assig | n. Salary \$ | / month |
| | | | | |
| Time Sheet Org: (if different from Bud Budget Organization | lget Org.) (Organizat | ion Name) | (Org. #) | % of time working % |
| Position Location Bldg: Room# | (Organization Name) | | (Org. #) | % of appointment |
| | (Organization Name) | | (Org. #) | % of appointment % |
| Phone#: | (Organizat | ion Name) | (Org. #) | % of appointment |
| Same as previo Manage depart Enter time for Serve as an Ac Manage Grants Other types of | tment budgets (If not the the department (If not the cademic Advisor | same as previous e same as previo | us employee, attach a | |
| Supervisor Name: | | | | |
| Approvals: (Please | print and sign name) Budget Org. | | | Date: |
| Dean/Director | Print | | Signature | Date: |
| Vice President | | | Signature | Date: |
| Print President | | Signature | Date: | |
| (For r | new positions or for filling | administrative (A | ι&P) positions) | |
| | | | | |
| Officia | al Use Only: Previously En | mployed | YesNo | |