

# Request to Hire Form

## Employment Information Form

Supervisor \_\_\_\_\_ Account # \_\_\_\_\_  
Employee Name \_\_\_\_\_ Student Status \_\_\_\_\_  
Employee Email Address \_\_\_\_\_ Home Dept. \_\_\_\_\_  
Current/previous UCSB employment? \_\_\_\_\_ If Yes, Department \_\_\_\_\_

Begin Date \_\_\_\_\_ End Date \_\_\_\_\_  
Job Title\* \_\_\_\_\_ Proposed Pay Rate\*\* \_\_\_\_\_ # Hours/Week \_\_\_\_\_  
Maximum Amount \_\_\_\_\_ Total amount to be charged to grant (including benefits) \_\_\_\_\_  
Primary Work Location \_\_\_\_\_

Description of Duties to be Performed:

Supervisor Signature \_\_\_\_\_

Date \_\_\_\_\_

### Approvals

Supervisor \_\_\_\_\_

Chair/Director \_\_\_\_\_

Signature

Date

Signature

Date

\*\* To be confirmed with current salary scales.