

Faculty Authorization to Hire (College of Medicine only)

POSITION INFORMATION

Pos Num (if assigned) or NEW	Type	Action			Fund	Orgn	Account	%
<input type="text"/>	<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PClass (for Compensation only)	Position Title	Supervisor Pos Number	Req. #		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Start Date	End Date	Annual Salary	FY Budget Salary	Hours per Pay	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Timesheet Orgn	Home Orgn	Cost Center for Background Check	<input type="checkbox"/> Check this box if individual is a remote worker.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Badge Code (Clinical Practice & CNHP)	Does this person interact with minors?		<input type="checkbox"/> YES <input type="checkbox"/> NO		Total			<input type="text"/>
<input type="text"/>	If YES, please explain:		<input type="text"/>					

EMPLOYEE

University ID (SSN if new)	Last Name	First Name	Middle Name	Type of Hire
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address	<input type="text"/>		Phone Number	<input type="text"/>

FUNDING TO FUNDING FROM

Fund Code	Orgn Code	Account Code	Cost Center Title	Position Title	Position Number	Amount	Percent

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APPROVALS

Preparer Name	<input type="text"/>	Preparer Email	<input type="text"/>	Home Dept.	<input type="text"/>
PI/Cost Center Admin	Print Name <input type="text"/>	Signature	Date <input type="text"/>		Phone <input type="text"/>
Director/Dean	Print Name <input type="text"/>	Signature	Date <input type="text"/>		Phone <input type="text"/>
Vice President	Print Name <input type="text"/>	Signature	Date <input type="text"/>		Phone <input type="text"/>
Compensation/HRIS	Print Name <input type="text"/>	Signature	Date <input type="text"/>		Phone <input type="text"/>

Authorization to Hire

This form should be used for the sole purpose of hiring or paying non-benefits eligible positions.

Employment Category Definitions:

- Full Time Temporary Employees (F/T Temp) can work for a maximum of 6 months and work at least 40 hours per week. Co-Op Employees are considered F/T Temp employees, with a 6 month maximum.
- Student employees are enrolled as full time Drexel students and can work a maximum of 20 hour per week.
- Part Time Temporary Employees (P/T Temp) can work for a maximum of 6 months and work between 20-39 hours per week.
- Casual employees can work a maximum of 19 hours per week and are scheduled to work on a regular basis.
- Per Diem employees are scheduled on an “as needed” basis and do not work a fixed schedule.
- Secondary Stipends are paid to full time employees for additional duties assigned. These duties are above and beyond their current role. Stipends do not have set working hours and are paid once per month based on services performed.

All new employees or employees who have not worked at the University within the last year are required to complete the appropriate New Hire Packet: <http://www.drexel.edu/hr/atDrexel/new/newforms/>

For additional information regarding Employment Categories, please contact your Talent Acquisition Consultant in the Human Resources Department: <http://www.drexel.edu/hr/about/contact/taconsultants/>