## NOTE: TEMPORARY HOURS ARE NOT TO EXCEED **1039 HOURS PER YEAR.**

## **REQUEST TO HIRE TEMPORARY EMPLOYEE**

## Section I: To be completed by supervisor

Date			Dept/Unit			
Temporary Position			No. of Temps Neede	d		
Hours per week			Weeks per Month			
Months per Year			Starting Date			
Ending Date			Work Time			
Required Signatures						
Immediate Supervisor:				Date:		
Next Line Supervisor:				Date:		
Next Line Supervisor:				Date:		
Vice President of Unit:				Date:		
Budget Approval						
VP Finance:				Date:		
Account Number:			Position Number:		FTE:	
Section II: To be completed by Human Resources						
Name of Temp Personnel:				Date Started:		
SSN:	Pay Grade:		Salary:	Per H	Per Hour:	
WV-11: Date Sent:			Date Approved:			
Date Sent to Payroll:						