

## Columbia State Community College – Recommendation for Employment

**TO BE COMPLETED BY HIRING SUPERVISOR**

Applicant Name \_\_\_\_\_ Position # \_\_\_\_\_

Position Title (If Faculty, include Primary Discipline) \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_ Date \_\_\_\_\_

**TO BE COMPLETED BY HUMAN RESOURCES**

Employment Classification

<p><input type="checkbox"/> <u>Faculty Rank</u></p> <p style="margin-left: 20px;"> <input type="checkbox"/> Instructor  <input type="checkbox"/> Assistant Professor  <input type="checkbox"/> Associate Professor  <input type="checkbox"/> Professor         </p> <p><input type="checkbox"/> <u>Professional/Administrative</u></p> <p style="margin-left: 20px;"> <input type="checkbox"/> Probationary Appointment  <input type="checkbox"/> Temporary Appointment (6 months or less) _____ (duration of appointment)         </p> <p><input type="checkbox"/> <u>Contract Period</u></p> <p style="margin-left: 20px;"> <input type="checkbox"/> 9-Month Appointment  <input type="checkbox"/> 12-Month Appointment  <input type="checkbox"/> Other Appointment         </p>	<p><u>Appointment Type</u></p> <p style="margin-left: 20px;"> <input type="checkbox"/> Tenure-Track Appointment  <input type="checkbox"/> Term Appointment  <input type="checkbox"/> Temporary Appointment  <input type="checkbox"/> One Semester: _____  <input type="checkbox"/> One academic year: _____         </p> <p><input type="checkbox"/> Clerical &amp; Support</p>
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**Codes**

Fund \_\_\_\_\_ Organization \_\_\_\_\_ Account \_\_\_\_\_ Program \_\_\_\_\_

Proposed Hire Date \_\_\_\_\_ Compensation Plan Salary Calculation \$ \_\_\_\_\_

**TO BE COMPLETED BY HUMAN RESOURCES jointly with HIRING SUPERVISOR**

Recommended Salary \$ \_\_\_\_\_ Reason for Adjustment from Calculated Salary: \_\_\_\_\_

**Approvals:** Recommended Salary  Approved  Not Approved

Second Level Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Director HR / Affirmative Action Officer \_\_\_\_\_ Date \_\_\_\_\_

Vice President \_\_\_\_\_ Date \_\_\_\_\_

President \_\_\_\_\_ Date \_\_\_\_\_

**TO BE COMPLETED BY HUMAN RESOURCES**

Applicant Accepted  Yes  No Date \_\_\_\_\_ IPEDS Prim FNC  None  Prim Instruct

Background Check Req'd  Yes  No Date \_\_\_\_\_ Clear to start work:  Yes  No

Local Experience Date \_\_\_\_\_ Other Higher Ed Exp \_\_\_\_\_ Related Exp \_\_\_\_\_