

Employee Consultant/Temp Employee Pre-Authorization Form

Employee Name and EID (if available)

Proposed Job Title:

Proposed Start Date:

Anticipated End Date:

Hourly Rate:

Anticipated hours per week:

Justification/Rationale:

Account Information (FOAP)

Funding:

Organization:

Account:

Program:

Activity:

Location:

Dept. Head/Hiring Auth. Signature

Date:

Executive Council Member Signature

Date:

Before a Temporary Employee or EC may begin performing work, the Hiring Manager is responsible for ensuring that the fully completed and approved EC Pre Authorization and Contract are submitted to HR_Employment@emich.edu