Employee Information

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: | | |  | | | | V Number: | | | |  | | | |
|  | | | | | | | | | | | | | | |
| Anticipated Start Date: | | | |  | | Anticipated End Date: | | | | | |  | | |
| Current Position | | | | | | | | | | | | | | |
| Title: |  | | | | | | | | PCN: | |  | | Suffix: |  |
| Percentage of time this work will continue during the temporary period: | | | | | | | | | | | | | |  |
| Temporary Responsibility Position | | | | | | | | | | | | | | |
| Title: | |  | | | | | | PCN: | | |  | |  | |
| Percentage of time doing these duties during the temporary period: | | | | | | | | | | | | | |  |
| Combined percentage of current and temporary responsibilities must equal 100% | | | | | | | | | | | | | | |
| Will there be any change in the employee’s FTE during the temporary period? | | | | | | | | | | | | | | |
| No  Yes If yes, explain: | | | | |  | | | | | | | | | |
| Is this a new request or a continuation of an existing temporary increase | | | | | | | | | | | | | | |
| New  Continuation If yes, list date of previous approval | | | | | | | | | |  | | | | |

Job Information

Describe specifically which of the duties from higher level position will be performed:

Describe specifically which of the duties from the current position will temporarily be delegated to another employee or not done at all:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Signature Approval & Routing | | | | | | |
| Step 1: |  | | |  |  | |
| Department Administrator Signature | | |  | Date | |
|  |  | | |  |  | |
| Step 2: | Equal Opportunity/Affirmative Action Review Email a PDF of this document to eo-aareview@uidaho.edu with the next page in this document “Affirmative Action Information” | | | | | |
|  |  | | |  |  | |
|  | EO/AA Approval | | |  | Date | |
|  |  | | |  |  | |
| Step 3: | HR sets a Temporary Target Salary Email signed PDF to hr-classcomp@uidaho.edu | | | | | |
|  |  | | |  |  | |
|  | Temporary Target Salary: | |  | | | |
|  | Provided by: |  | | Date: | |  |
|  |  | | |  |  | |
| Step 4: | Fill out and submit a Staff Salary Processing Form Supervisor uses the temporary target salary provided by HR to establish temporary rate of pay. This form must be attached to the Staff Salary Processing Form and routed for appropriate approvals. | | | | | |

EQUAL OPPORTUNITY/AFFIRMATIVE ACTION INFORMATION

to accompany the Staff Work Performed Temporarily at a Higher Market Rate Form

*NOTE: Do not file with the employee’s personnel records as it may potentially contain personnel information of others.*

Other Employees Considered

Indicate which other available and comparably skilled employees (include names) from within the department were considered for the temporary duties at the higher classification:

Please provide a brief explanation for why these employees were not selected: