

Plymouth State University Human Resources Office

Extra Help Appointment Payment Request Form (J-3)

Trans #

USNH ID Last Name First Name M.I.

Department Building MSC #

Designated Supervisor& USNH ID Start Date End Date

Fund Org Account Program Activity Location
Time Sheet Org

Select One of the Below Choices:

- PNS020 (00972) Student Exempt Non-FLSA, Res Life CA's, Student Activities
- PNCE01 - (03098) Coach, Recreational Coach
- PNCE02 - (03098) Athletic Trainer
- PNCE03 - (03997) STEM services, Science, Technical, Engineering or Math
- PNCE04 - (02767) Administrative Services
- PNCE05 - (02767) Professional Services
- PNCE06 - (02766) Consultative Services Salary
- PCCS01- (PAYSS) Staff Stipend

FTE of 75% is defined as 75% of 260 full days for exempt staff; and 75% for the AY for faculty (24cr/6units)

Hours per day: Hours per week:
FTE: Total Pay Amount:

Will this employee be working out of the state of New Hampshire in this position?

If yes, please contact HR with the location and address.

Yes No

Briefly state what this payment is for:

Job Title:

Job
Description:

Authorized by: _____ Date _____
Hiring Supervisor

Authorized by: _____ Date _____
Funding Supervisor (if different)

Authorized by: _____ Date _____
Financial Services Center Representative

Authorized by: _____ Date _____
Division Approval

Original

Revised

Addendum

Date Received in Human Resources: