

Please follow the important steps shown below to hire a temporary employee. This process must be completed prior to the start of the temporary employee's start date. It is against university policy to allow an employee to work prior to all these steps being completed. It is unlawful to not pay an employee working at the University; however, we cannot pay an employee unless the necessary paperwork is completed and received by Human Resources.

- Complete a Temporary Personnel Authorization Request Form and have it approved by your Vice President.
- 2. Send the Temporary Personnel Authorization Request Form to Human Resources. HR will call you to tell you when the Temporary Authorization Form has been received and approved.
- 3. A Background Check must be completed on ALL new temporary hires PRIOR to the employee's start date which may take 5-10 working days. Human Resources will inform you when the background check has been completed.
- 4. Inform HR of the person's name and address who be filling the temporary position so an offer letter can be generated.
- 5. Prepare a PDO, obtain the appropriate approvals and signatures and forward it to Human Resources. AN EMPLOYEE CANNOT BE PAID UNTIL HUMAN RESOURCES RECEIVES AND PROCESSES THE PDO AND ALL OF THE APPLICABLE PRE-EMPLOYMENT STEPS HAVE BEEN COMPLETED. It is illegal to not pay a person who performs work for the University and there are severe fines for such violations. For those reasons, DO NOT allow any employee to start working until all the required information (Temporary Authorization Form, I-9, Tax Forms, PDO) is received by HR and a Background Check is completed.
- 6. Once HR informs you that the Background Check has been successfully completed, please forward the following to Human Resources:
 - A completed I-9;
 - the appropriate tax forms; AND
 - A completed and signed PDO.
- Once Human Resources has the required information and the approved PDO the employee can start working. Prior to that, the temporary employee is not authorized to work.

Temporary Authorization Request Form

A temporary employee:

- Is ineligible to receive employee benefits.
- Is hired for a limited and specific time frame.
- Is hired for limited and specific salary expenditure.
- Cannot work more than 900 cumulative hours in any 12-month period.

If any of these restrictions will not be met, then the individual is considered an employee, entitled to benefits and must be hired using the search authorization process.

The Temporary Authorization Request Form:

- Must contain a Speed Key & Account Number.
- Must be signed by the Officer of the requesting department.
- Must be signed by the VP of Finance.

Note: The Human Resources Department will not hire the temporary employee until the signed authorization form has been received.



TEMPORARY PERSONNEL AUTHORIZATION REQUEST (When completing this form online use shaded areas for text)

TO:	
	(Applicable Officer)
FROM:	
((Hiring Supervisor)
I reques	t authorization to hire a temporary employee for the following reason(s):
• I	List the key responsibilities of this position
r	Position justification, why this temporary position must be filled. Provide comments as to safety, revenue enrollment, service, budget impact, government requirements, goal impact, number of students/faculty served, transactions, calls, visits, programs etc.
• I	How will work be completed if this position is not approved?
(Can someone else do this work in addition to their own? Can you temporarily transfer someone over to do this work from within your organization? Can you divide this work up and assign to multiple people?

The t	emporary assignment wil	l last from	until					
Temp	porary Employee Name (i	f known)						
Is ten	nporary Employee a unive	ersity student?	Yes	□No				
Is thi	s for a grant position?		Yes	□No				
	Rate of Pay Per Hour	\$	Line A					
	Total Hours* for this request (Hours per week X Total weeks)	Hours	Line B					
	Total Salary Expenditure	\$	Lines (A x B)					
	*Total Hours may not exceed	Total Hours may not exceed 900 cumulative hours in any 12-month period.						
	Speed Key & Acct. # to			(MUST BE FILLED IN)				
	Your signature				_			
	******	*****	*****	*****	******			
	The above request is	Approved	l 🔲	Denied				
	Authorized Officer's Sign			Date				
	*****	*****	*****	****	******			
	COMPLETED FORM TO VP OF FINANCE.	O BE SENT TO	THE ATTEN	TION OF	GEORGE SYNODI			
	Approved:							
	Ge	orge Synodi			Date			



Background Check Notification and Instructions

The University of New Haven has partnered with <u>SSC</u> to provide required background checks. Since you were selected for a position with the University of New Haven, a background check will be performed before your start date. You will receive an email at the email address you provided us with instructions on how to initiate the background check process online. The online process will take you approximately 15-20 minutes to complete. Additionally, the following information may be needed to complete the process: Social Security Number, Address History for the last 7 years, Employment History, Education Information, and Driver's License Number. Thus, it may be helpful to gather this information prior to logging in.

SSC's objective is to complete this process quickly. Please make every effort to provide all the requested information. When additional information is needed, a representative from **SSC** may call or email you. Please reply promptly to ensure that the report can be processed quickly, a delay in responding to the request may result in the postponement of your hire date.

Thank you again for complying with this process and helping us to attain our goals of safety and integrity.

If you have any questions regarding the completion of the online process, please contact **SSC's** Customer Service Unit at +1 800.688.1707. They are open from Monday to Friday 8:00 a.m. to 8:00 p.m.

I understand and acknowledge that this release of information can involve my qualifications, performance, credentials, or other characteristics or factors affecting my suitability for employment with The University of New Haven.

Acknowledgement							
Name							
	Legal First Name	Legal MI	Legal Last Name				
Email							
Address							
Phone #							
Position							
Department							