

# OSSR HR SUBMISSION FORM

PLEASE CHECK ONE OF THE FOLLOWING:

SUBMISSION DATE: \_\_\_\_\_

- Undergraduate Student
- Graduate Student
- Other

PLEASE CHECK ONE OF THE FOLLOWING:

- Previous UIC Employee
- Current Employee
- New Hire at UIC

PLEASE COMPLETE THE FOLLOWING INFORMATION:

EMPLOYEE NAME: \_\_\_\_\_

CONTACT #: \_\_\_\_\_ E-MAIL : \_\_\_\_\_ UIN # : \_\_\_\_\_

PROJECT : \_\_\_\_\_

Appointment Period: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

PLEASE CHECK ONE OF THE FOLLOWING:

- RA
- GA
- Graduate Hourly
- Undergraduate Hourly
- OTHER

FTE: \_\_\_\_\_%

# of hours/wk: \_\_\_\_\_

PLEASE CHECK IF STUDENT WILL BE USING FEDERAL WORK STUDY

Scope of Work Memo: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## OSSR HR USE ONLY

C-FOAP 1: (FUND) \_\_\_\_\_ (ORG) \_\_\_\_\_ (ACCT) \_\_\_\_\_ (PROG) \_\_\_\_\_ (%) \_\_\_\_\_

C-FOAP 2: (FUND) \_\_\_\_\_ (ORG) \_\_\_\_\_ (ACCT) \_\_\_\_\_ (PROG) \_\_\_\_\_ (%) \_\_\_\_\_

MONTHLY RATE: \$ \_\_\_\_\_

HOURLY RATE: \$ \_\_\_\_\_

OSSR Processor: \_\_\_\_\_

Date Completed: \_\_\_\_\_