



Employment Request Form

Employee Name _____ Student Status _____
Grad/Undergrad/NA

Email Address _____ Home Dept. _____

Current/previous UCSB employment? _____ If Yes, Department _____
Yes/No

PI/Supervisor _____ Grant Agency/Account # _____

Payroll Title/TC _____ Pay Rate _____ # Hours/Week _____
Month/Hour

Begin Date _____ End Date _____

Maximum Amount _____ Primary Work Location _____
Total amount to be charged to grant (including benefits)

Description of Duties to be Performed:

Employee Signature _____ **Date** _____

Is this prospective employee a near relative?* Yes No

**A near relative is defined as a spouse, domestic partner, parent, child (including the child of a domestic partner), or sibling. In-laws and step-relatives in the relationships listed, including relatives of the domestic partner who would be covered if the domestic partner were the employee's spouse, are also defined as near relatives.*

If Yes, please provide the following information:

Name (s) _____ Relation _____

Campus & Dept. _____

Approvals

Principal Investigator _____ Grant Administrator _____
Signature Date Signature Date