



New Hire / Re-Hire Form

MID Employee

EDUStaff Employee

Other

New Hire

Re-Hire

Employee's Name: _____

Effective Date: _____ **Desired Start Date:** _____

Primary Position

Position Title: _____

Direct Supervisor Name: _____

Hourly Pay Rate or Annual Salary: _____

ESPA: _____ Grade _____ Step _____ Shift Differential

Adjunct Instructor – Degree Level: _____

Account (GL) Number: _____

Status: Full-Time Part-Time Temp. Student

Hours Scheduled Per Week: _____

Secondary Position

Position Title: _____

Direct Supervisor Name: _____

Hourly Pay Rate or Annual Salary: _____

ESPA: _____ Grade _____ Step _____ Shift Differential

Adjunct Instructor – Degree Level: _____

Account (GL) Number: _____

Status: Full-Time Part-Time Temp: Student

Hours Scheduled Per Week: _____

Comments:

Approval: _____
Hiring Manager Signature

_____ Date

VP or Assoc. VP Signature

_____ Date