

CHICAGO STATE UNIVERSITY

Office of Human Resources

Administrative Hiring Form

Name: _____

University I.D. No.: _____
(Leave Blank for New Hires)

Highest Degree: _____

University: _____

Period of Employment: From: _____

Through: _____

Full-Time

Application For Employment

Part-Time

Attached

On File in Human Resources

Level and Title: _____

Rank: _____

Salary: Monthly _____ Annual _____

Contract Term: _____ Department Name: _____

New Position Replacement Position for Account Number: _____

Position Number: _____

Class Code: _____

APPROVALS

1. _____
Director/Dean Date

4. _____
Equal/Opportunity Officer Date

2. _____
Appropriate Vice President Date

5. _____
President Date

3. _____
Director of Budget Date

This form must be returned to the Office of Human Resources for payroll processing
Application for Employment Must Accompany This Form