 **INSERT UNIT/DEPARTMENT LOGO HERE**

**MEMORANDUM**  DATE

|  |  |
| --- | --- |
| TO:  | Cathleen Moore-Linn, RCUOG Executive Director \_\_\_\_ / \_\_\_\_ / 2021 |
| VIA:  | (Dean or Director) \_\_\_\_ / \_\_\_\_ / 2021 |
| FROM:  | Principal Investigator \_\_\_\_ / \_\_\_\_ / 2021 |
| SUBJECT:  | Request to Hire EMPLOYEE NAME, FTE 20 WEEK HIRE  |

**Employee Name:**

**Position Title:**

*(Must follow RCUOG employee position titles and wages grades)*

**Unit and Department:** Example: ORSP/EPSCoR

**Employee Type:** 20-week limited term hire; Full-Time

**Work Hours:** 40 hours per week

**Grade, Step, Hourly Rate:**

*(Must follow RCUOG general pay plan)*

**Employment Start Date: .**

**Employment End Date: .**

*(End date will be determined by RCUOG as the 20 weeks will be fulfilled. If the employment period is shorter than the 20-week period, indicate the end date)*

**Work Location: .**

**Supervisor: .**

**Benefits:** Social Security, 4 hours annual leave and 4 hours sick leave per PPE, holiday pay

**Account Number:** 30-XX-XXXXXX-X-XXXXXXX

Character of Duties:

* . **.**
* **. .**
* **. .**
* **. .**
* Other duties assigned;

**Certification of Funds:** 30-XX-XXXXXX-X-XXXXXXX

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**RCUOG Certifying Officer

**Approved:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**RCUOG Executive Director