FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY **RECOMMENDATION FOR FACULTY EMPLOYMENT**

Position #	Date:			
E&G Grant				
From:			A	
College/School	Division	Area		
Name of Employee				
Date of Birth	Race	Race Sex		
Home Address	Home Phone			
Campus Mailing Address	Campus Phone		Phone	
Highest Degree	Date of Degree			
FTE% Position Title	Class Code	Professorial Rank		
Academic Discipline	Tenured	Earning Tenure	Not Eligible for Tenure	
Biweekly Salary Rate \$			-	
Grant #	Grant Expiration Date			
Period of Appointment	to	Type of Appointme	ent	
Comptroller's Account #				
Assisted Duties				
Assigned Duties: Teaching%	% of time will be devoted to Grant#			
Counseling%	% of time will be devoted to Grant#			
Public Service%	Pay status (working) from	to _		
Research%	and from to)	Non-pay status	
Administrative%	(not working) from	to	_ and from	
	to This posit	tion is located in	county.	
TOTAL 100%				
This individual (is/is not) employed by ano	ther State agency.			
	PERSONNEL/PAYROLL USE C	ONLY		
No. Withholding Exp Martia	al Status	Retirement Code_		
Social Security State	Health Insurance	Pay Grade		
Yes/No	Yes/No			
SIGNATURE	SIGNATURE		DATE	
Area Chairperson				
Division Director				
Contracts and Grants Officer				
Vice President for Academic Affairs				