

**THE UNIVERSITY OF TEXAS OF THE PERMIAN BASIN**  
**HOURLY EMPLOYEE APPOINTMENT FORM**

Date: \_\_\_\_\_ Prepared by: \_\_\_\_\_

**Personnel Action:**

- Rate of Pay Change (justify in Remarks)       Class & Title Change       Account Number Change  
 Other (add in Remarks) (list all accounts)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**EID (Employee Identification Number):** \_\_\_\_\_  
Do Not use the Student Identification Number on this Payroll Form

**Employees Date of Birth (Required):** Month \_\_\_\_\_ Day \_\_\_\_\_

**Department:** \_\_\_\_\_ **Account Number:** \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Work Study:** Yes  No       **Federal Funds**       **State Funds**

**Hours Per Week:** \_\_\_\_\_ **Appt. Begin Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Hourly Rate:** \_\_\_\_\_ **Estimated Total for Appointment:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Job Code:** \_\_\_\_\_

**\*All blanks are required to be completed. If all blanks are not completed the form will be returned. \***

**Remarks:**

**Termination**

**Account Number:** \_\_\_\_ - \_\_\_\_ - \_\_\_\_      **Last Day Worked:** \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
**Budget Head**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Human Resources**

\_\_\_\_\_  
**Date**