BLUEFIELD STATE UNIVERSITY NEW HIRE SALARY & FUNDING SOURCE AUTHORIZATION FORM

(To be initiated by the Immediate Hiring Supervisor and used for "Regular" Faculty and Non-Classified Staff Positions Positions)

To be completed by the Immediate Hiring Supervisor: Complete ALL requested information below. Vacancy/Position Title: If Faculty position, Hiring Dean and Provost is to determine and specify Rank) Candidate/Finalist Name (as it appears on social security card) **Indicate Position Type:** i.e. "Faculty," or "Nonclassified Staff" Faculty Appointments (Tenure, Tenure-Track, Fixed Term) **FLSA Exemption Status** ("Exempt" or "Non-Exempt") **BSU Position Number:** Position FTE (i.e. 1.00 FTE, .53 FTE): Salary to be Offered: **Funding Source:** Requested Start Date: (If Faculty position, provide contract start and end dates, i.e. (mm/dd/yyyy) to(mm/ dd/yyyy) **Previous Incumbent:** JVA Number/Other Information (if any). Please be specific. **APPROVALS** - Please obtain required signatory approvals in the numerical sequence indicated. 1. Immediate Hiring Supervisor Date 2. Cabinet-Level Administrator Date 3. Chief Financial Officer Date 4. Director of Title III (If grant funded) **Completed by Hiring Supervisor or Human Resources:** 5. President Date Date and Time Offer Extended Date Offer Accepted **Employee Start Date**

Payroll Use Only: WVOASIS Confirmed Start Date: ______

Date Offer Declined. If declined, provide

reason if known.