NEW EMPLOYEE YES NO		FISCAL YEAR
BUDGET CODE CHANGE	L. I. Comp	
ONLY	<b>SOLANO</b>	
	COMMUNITY COLLEGE	

PERSONNEL PAYROLL ACTION (FORM-6)		
This form is mandatory when requesting to employ temporary/short-term or student personnel to perform short-term projects and not for performance of routine duties. In addition, this form is to employ substitutes to temporarily replace a classified employee who is absent from duty. All short-term, substitute, regular employee, temporary faculty, student worker and federal work-study positions must signed by an Executive Manager. In addition all short-term, substitute, regular employee, temporary faculty must receive Board approval, live scan clearance, and negative TB test results prior to		
the start of work.		
SSC ID # NAME		
CLASSIFIED  Short-term Seasonal (135 days max or 999 hours, whichever comes first)  *Provide service not to exceed 50 days each fall and spring semesters and 35 days during the summer.		
Short-term Periodic (105 days max or 999 hours, whichever comes first) *Not to exceed more than 35 days each semester or summer session.		
Short-term Project (150 days max or 999 hours, whichever comes first)		
Substitute (60 days max, extensions require approval) Sub For:		
Regular Employee – Additional Assignment		
STUDENT  Student Worker Federal Work Study Cal Works		
FACULTY  Hourly Academic		
JOB TITLE DIVISION/DEPT		
START DATE END DATE RATE OF PAY NTE		
FUNDING/GRANT NAME		
BUDGET DISTRIBUTION %		
%		
Timesheet approval by		
Budget Manager Signature Approval		
Executive Manager Signature Approval		
**FISCAL AUTHORIZATION**		
Budget code(s) approved Approved by Date		
**HUMAN RESOURCES AUTHORIZATION**		
Board Agenda Date Hourly Rate Position #		
TB Live Scan I-9 Docs Retirement		
HR Approval Date		