



Adjunct Appointment

Office of Human Resources

Personnel Action Request

Employee ID: T Last Name: _____ First Name: _____ MI: _____
 Address: _____
 City: _____ State: _____ Zip: _____ County: _____
 Phone: () _____ Department: _____

Begin (M-D-Y)	End (M-D-Y)	Pay Rate Per (Mo/Hr.)	Fund	Org	Account	Program	% of Salary	Position Number

Semester (Fall/Spring/Summer) _____ Total # Credit Hours _____ Total Salary \$ _____
 List Course Information:
 Course Name _____ Course # _____ Section Number # _____
 Course Name _____ Course # _____ Section Number # _____
 Course Name _____ Course # _____ Section Number # _____

Highest Degree: _____ Year granted: _____ Experience: _____ # of Years of Higher Education Experience
 Institution: _____ # of Yrs higher ed non-teaching experience
 Institution City/State: _____ # of Yrs related (not higher ed) exp.

Special Conditions:

PEOPLEADMIN ROUTING

Requestor to **Department Head** to **Dean** to **VP** to **Title III** to **Grants** to **Budget** to **Human Resources**

- Complete form and save to your drive/network folder.
- Begin new PARF action in PeopleAdmin.
- Attach completed form to PARF action.
- Track action to make sure routing does not stall.

Adjunct Appointment Contract

As an Adjunct employee, I understand:

- This appointment is made subject to the laws of the State of Tennessee, the requirements and policies of the Tennessee Board of Regents and the requirements and policies of this institution.
- The above-stated salary is contingent upon my successful completion of the service for the full term of this agreement. The salary will accrue and will be payable as follows: _____ . In the event of failure to complete the specific terms of the appointment, salary will be prorated in accordance with the policies of TSU.
- This appointment and the above-stated salary is in consideration of my faithful performance to the best of my ability of the duties and responsibilities assigned to me as an adjunct faculty member at Tennessee State University.
- I am not eligible for employment benefits (retirement credit, state insurance plan, annual or sick leave, holiday pay, or longevity credit). Social Security will be deducted from Adjunct paycheck unless a member of a retirement system or a rehired annuitant as specified in 26 CFR Part 31.
- Finalization of the pending assignment will be subject to the course(s) sufficient enrollment and/or other administrative considerations. Should the class(es) not have a sufficient number of students registered, the agreement automatically becomes void. Tennessee State University also reserves the right to terminate this agreement and transfer the classes to a full-time faculty member.
- This appointment does not include any assurance, obligation or guarantees of subsequent employment.
- Classes will begin on _____, 20____ and will end on _____, 20____, including examinations. In the event you cannot meet the class(es) at any scheduled time, you must immediately contact your Department Head. Any absenteeism will be reflected in your rate of pay.
- The class roll(s) will serve as the official record of attendance and catalog descriptions as the official record of contract hours taught.
- This agreement may be terminated without prior notice.
- By acceptance of this agreement, I agree to abide by the terms of the Drug-Free Workplace Act of 1988 as defined in published institution statements and policy. I also agree to notify the Department of Human Resources of any criminal drug conviction for a violation occurring in the workplace no later than five (5) days after such conviction.
- My employment with Tennessee State University is contingent upon completion of the Employment Eligibility Verification Form (Form I-9) by the third day of employment as required by law to certify work eligibility. This agreement becomes void if I fail to provide the required I-9 documentation.
- Method of payment at Tennessee State University is through direct deposit to a checking or savings account at a bank or credit union. I agree to provide necessary account number/s for deposit of my salary/wages within two weeks of employment
- This contract is not binding until approved the President or designee and executed by me (the appointee) and Tennessee State University.
- I agree to abide by the policies of the Tennessee Board of Regents and of Tennessee State University regarding Intellectual Property, and hereby acknowledge my responsibilities under those policies to disclose and possibly assign (as required under policy) Intellectual Property developed by me, either solely or jointly with others, during the term of my employment, and to otherwise assist TSU as required by policy in protecting rights it may have in that Intellectual Property.

I am/I am not employed as a regular part-time or regular full-time employee at another state agency or institution. In order to process a payroll check, federal regulations require disclosures of your retirement system(s). If none, please write in "none" for the name of the "Name of Retirement System".
You are required to notify the Director of Human Resources should you become employed at another state agency/institution.
I understand that I may be terminated without notice if any information I provide is false.

Name of Retirement System: _____ Date: _____
 Appointee's Signature: _____ Date: _____