

Authorization for Employment Quick Guide

Who: The PI is ultimately responsible for the budget on each of his/her projects but support staff may be asked to complete some of this work. This form is reviewed by the Office of the Treasurer and processed by Human Resources.

What: The Authorization for Employment Form contains the information Human Resources needs to pay your employees correctly from your project/grant.

Where: Forms: <u>finance.tcnj.edu/forms/</u>; Training: <u>http://academicgrants.tcnj.edu/ug-training/</u>; Office of the Treasurer: Green Hall Room 207.

When: This form should be completed at the start of a new project/grant, any time someone is added to your project/grant (full time or part time), or any time an employee's charging instructions (chartfields) change.

Why: This form ensures that employees working on your projects/grants are paid appropriately and informs effort verification.

How: Complete the Authorization for Employment Form using information you retrieve from your grant budget. If the position is a new position, also complete the Grant Position Request Form. Deliver the completed and signed Authorization for Employment Form with copies of the approved budget and budget justification to the Office of the Treasurer.

Indicate whether this	TCNJ THE COLLEGE OF	F Y		Grant Authorization for Employment Not for use for initial appointment. Please submit a minimum of two weeks before hiring an employee. This form supersedes all previously submitted forms.					
AFE is to change chartfields (or appoint	Action (Please check appropriate box): Employee Name: <u>Jon Snow</u>			Change in Chartfield Merit increase tref be if retro pay, please no		Reappointment son in start date type RETRO PAY)			
a new employee),					Title of Position:	Project Manager			
reappoint an existing employee, or process a merit pay increase	Grant Title: <u>N</u>	light's Watch grant			Full-time (account \$1200) Hours per Week: Current Salary FT/PT:	Part-time (account \$1210) 35 \$ 58,917.38			Complete this section with the
	· -	Department of Defense Catelyn Stank			Proposed Salary FT/PT: OR Rate for Hourly Employee Hourly Employee Budget not to Exceed Check Here If Hourly Employee** "Yourly Employees will adont time cards to it Supervisor/PI will approve each time care			- - -	employee, position, and pay information
Enter the start and end dates for this action (must be within the grant start and end dates)	Distribution: Start Date: must be beginning of pay period End Date:	7/1/2015 6/30/2016	-	Automatic Calculative of Pay Periods: Bi-weekly Rate: ACTUAL AMOUNT	on - DO NOT TYPE IN THIS BOX TO BE PAID:	\$ \$	26.20 2,248.75 58,917.38		
<u>'</u>	Percentage 19.98% 80.02%	Account Fund 51200 46 51200 40	Dept ID	Class 03 03	Program	Proj/Grant N1999 F1699	Grant End Date 6/30/2016 6/30/2016		Enter the chartfields, percent salary allocation to each, and end date for grant chartfields

Tips:

- Submit AFEs to the Office of the Treasurer at least three weeks prior to the start date to ensure timely processing.
- Submit reappointment AFEs at least three weeks prior to the end date of the current AFE to avoid termination of the employee's pay and email/systems access.

More Information: For more information refer to the Grant Financial Management Manual or contact the Office of the Treasurer at 609.771.2186.