**Instructions for Special Consultant Agreement Form**

**Submit requests for Special Consultant employment at least 2-3 weeks prior to the effective date of the appointment.**

**Part I. General Information**

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| ***Field Name*** | ***What Contents Should Be*** |
| **Date** | Select the date the form is being completed from the calendar |
| **Appointment** | Check “new” if appointment is new and “extended” if this is an extension of a previous appointment |
| **Consultant Name** | Identify the individual recommended for appointment as a Special Consultant, by name, as it appears on their social security card. |
| **SSN** | Enter all 9 digits of Special Consultant’s Social Security Number with no spaces. Hyphens will default when tab button is pressed. |
| **Address** | Enter complete home mailing address, city, state, and zip code. |
| **EMPLID** | If the individual is already a CSUS employee, enter Employee ID number. |
| **Phone Numbers** | Enter work, home, and cell phone numbers, including area codes, as numerical digits with no spaces or parentheses. Phone number format will default when tab button is pressed. |
| **Department** | Enter specific CSUS department for which the Special Consultant will be working. |
| **Supervisor/Ext** | Enter the name of the Management level employee or Dept. Chair who is responsible for the position. (This is the person who will be responsible for certifying the job performance is satisfactory and signing the Special Consultant’s payment request.) Enter 4 digit campus extension number. |
| **Contact Name/Ext** | Enter who should be contacted if there are questions about the transaction. Enter 4 digit campus extension number. |
| **Check all that Apply** | Check Special Consultant’s current employment status. If individual is currently a CSU employee from another campus, choose the campus name from the drop-down menu. |
| **Part II. Complete for Current CSU and CSU Stanislaus Employees Only** | |
| ***Field Name*** | ***What Contents Should Be*** |
| **Primary CSU/CSU Stanislaus Position status** | For employees currently on the CSU or CSUS payroll, select applicable time base from drop down menu. |
| **If Part Time Enter Percentage** | If current employment status is less than full time, enter the percentage expressed in decimal form (for example: 50% is .50). Percentage format will default |
| **More than 125% employment?** | **If employee’s time base (not salary) exceeds 125% of full-time (50 hours a week), consult Faculty Affairs or Human Resources before proceeding.** |
| **Outside normal work hours?** | If employee’s appointment will be performed outside normal working hours, check “yes” and skip to Part III. If not, check “no” and answer the next three questions below. |
| **Taking vacation to complete this assignment?** | If employee is using vacation hours from his/her current job to complete this assignment, check “yes” and complete and attach Absence Request Form 634 (a link to the form is provided). |
| **Adjusting work schedule?** | If employee is adjusting his/her current work schedule to accommodate the assignment time, check “yes” and attach the adjusted work schedule. |
| **Is this an Academic Year Appointment?** | If employee is faculty and the appointment is during the academic year, check “yes”. |
| **Part III. Specific Description of Duties** | |
| ***Field Name*** | ***What Contents Should Be*** |
| **Description of Duties** | Describe the primary duties the Special Consultant will perform, the responsibilities they will be held accountable for, the qualifications required and the specialized skills/knowledge necessary in order to perform the work. The text will wrap. Attach separate page if necessary. |
| **Part IV. Payment Information** | |
| ***Field Name*** | ***What Contents Should Be*** |
| **Beginning Date** | Select beginning date of appointment from the drop down calendar. |
| **Ending Date** | Select expected ending date of appointment from the drop down calendar. |
| **Daily Rate** | Enter daily rate of pay (refer to CSU Salary schedule class code 4660; a link to the salary schedule is provided). Enter numerical digits only; number will default to currency format ($X,XXX.00) when tab button is pressed. |
| **Number of Days Authorized** | Enter the estimated not to exceed total number of days to be worked. |
| **Maximum Payment Authorized** | Enter the total not to exceed dollar amount for the length of the appointment. Enter numerical digits only; number will default to currency format ($X,XXX.00) when tab button is pressed. |
| **Account Number** | From drop down menu, enter funding source. Enter Dept ID and Fund. If required by department, enter program and class. Account code is defaulted to 601302. |
| **Budget Use Only** | **Leave CMS and PIMS #s blank. This section is for Budget Office Use Only.** |
| **Part V. Approvals (original signatures only) –PRINT FORM PRIOR TO COMPLETING THIS SECTION. All campus approvers should print name, sign and date.** | |
| ***Field Name*** | ***What Contents Should Be*** |
| **Dean/Dept Head** | The Dean, Department Director or AVP should sign and date the form. |
| **Faculty Affairs/Human Resources** | All requests for current faculty (Unit 3) employees should be forwarded to Faculty Affairs for review and signature approval.  All other requests should be forwarded to Human Resources for review and signature approval. |
| **Budget** | Forward to the Budget Office for CMS/position control transactions and signature approval |
| **Provost/Vice President** | All requests for Special Consultants in an Academic Affairs Department should be forwarded to the Provost for review and signature approval. All requests in other departments should be forwarded to the appropriate area Vice President (or designee) for review and signature approval. |
| **Consultant** | The Special Consultant should sign their agreement *after* all campus approvals have been obtained. |

**Distribution** – Original – Human Resources or Faculty Affairs; Copies – Consultant, Hiring Department, Payroll