

Short-Term Renewal (STR) of Employee Information Form

This form may only be used for a one month (or less) extension of an already existing contract. Extensions of more than one month require a new Employee Information Form.

Full name of Employee:	
Student/Employee ID:	
Position:	
Department:	
Original End Date:	
MM/DD/YYYY Rate of Pay:	
Budget Code:	
Please extend the work period for the above emplo	yee to:
Signature of Chair/Director/Grantee (Digital Signature Field, click to sign)	 Date
For Office Use Only	
For HR use ONLY: PT SM BS BH WSP	Position ID (for HR use ONLY):
Human Resource	Date
Finance	 Date