**This form is required for SHRA and EHRA non-faculty employees. Approval by the Office of Human Resources is required in advance of any Dual Employment.**

 **APPOINTMENT TYPE:** [ ]  **SHRA** [ ]  **EHRA non-faculty**

**PROPOSED DUAL EMPLOYMENT JUSTIFICATION:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Date of Request: |       |
| Requesting Agency: |       |
| Agency Contact: |       | Telephone Number: |       |
|  |
| Describe Emergency or One-Time Assignment:      |
| Identify the specialized knowledge, skills, or experience needed to accomplish the assignment:      |
| Describe the efforts to recruit a temporary employee (other than the University staff employee proposed below) possessing the skills and abilities identified above:      |

**PROPOSED DUAL EMPLOYMENT ARRANGEMENT:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Beginning Date: |       |  | Hours Per Week: |       |
| Ending Date: |       |  | Total Payment: \* |       |
| Work Schedule: |       |  |  |  |

|  |  |
| --- | --- |
| **\*** | **Total payment must be indicated for both non-exempt and exempt employees.** |

**PROPOSED UNIVERSITY PERMANENT FULL-TIME or PART-TIME STAFF EMPLOYEE:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employee’s Name: |       |  | SHRA Branch/Role/Competency: |       |
| PID: |       |  | EHRA non-faculty Working Title: |       |
| Department Name: |       |  | Position Number: |       |
| Department Number: |       |  | Wage-Hour Status: |  Exempt Non-Exempt |
| Campus Address: |       |  | Current Work Schedule: |       |

**APPROVAL CERTIFICATION:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|       |  |       |  |       |
| Name of Dept. Head/Authorized Rep. of theEmployee’s Parent Agency (UNC-CH) |  | Name of Dept. Head/Authorized Rep. of the Borrowing Agency |  | Name of Sr. Dir. E&S, Asst. Dir E&S, or EHRA non-faculty Rep |
|  |  |  |  |  |
| Signature of Dept. Head/Authorized Rep. of the Employee’s Parent Agency (UNC-CH) |  | Signature of Dept. Head/Authorized Rep. of the Borrowing Agency |  | Signature of Sr. Dir. E&S, Asst. Dir. E&S, or EHRA non-faculty Rep |
|       |  |       |  |       |
| Date |  | Date |  | Date |

**Scan and submit this signed form to the Staffing Support Services Specialist in the Office of Human Resources.**