



EMPLOYMENT OF RELATED PERSONS CERTIFICATE

This form and organization chart(s) must be submitted and approved as follows. If related/affiliated to more than one person, attach separate form.

- For permanent EHRA and SHRA new hires/rehires: Attach documents to PeopleAdmin Hiring Proposal
- For current SHRA/EHRA employees, temporary applicants, unpaid volunteers, interns and visiting scholars: Submit documents via email to: specialemployment@unc.edu

Today's Date:	
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TYPE OF REQUEST:	<input type="checkbox"/> New hire/rehire	<input type="checkbox"/> Organizational change	<input type="checkbox"/> New relationship/close affiliation
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PROPOSED/CURRENT APPOINTEE INFORMATION:

Paid Appointment Status and Type (if applicable): <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> SHRA <input type="checkbox"/> EHRA Non-Faculty <input type="checkbox"/> EHRA Faculty		Unpaid Appointment Type (if applicable): <input type="checkbox"/> Unpaid Volunteer <input type="checkbox"/> Unpaid Visiting Scholar <input type="checkbox"/> Unpaid Intern	
Full Name:			
PID Number (if applicable):			
Position Number (if applicable):		Appointment Title:	
Supervisor Name:		Supervisor Position Title:	
Department Name:		Department Number:	

RELATED PERSON INFORMATION:

Full Name:			
PID Number:			
Position Number (if applicable):		Appointment Title:	
Department Name:		Department Number:	
Supervisor Name:		Supervisor Position Title:	
Type of Relationship:			

DEPARTMENT HEAD OR AUTHORIZED REPRESENTATIVE CERTIFICATION AND APPROVAL:

I attest the proposed/current appointment will not result in a relative (or closely affiliated person) supervising or having any influence over the other relative's employment, promotion, salary administration, other related management or personnel decisions, or in any violation of the subject policy.

Name of Department Head or Authorized Department Representative

Signature of the Department Head or Authorized Department Representative

Date

OFFICE OF HUMAN RESOURCES CERTIFICATION AND APPROVAL:

Name of Assistant Director, Employment or Senior Director of Employment & Staffing

Signature of Assistant Director, Employment or Senior Director of Employment & Staffing

Date