



MONTHLY HIRING AUTHORIZATION

(FULL-TIME RIC EMPLOYEES ONLY – ADDITIONAL LIMITED ASSIGNMENTS)

MP06

PLEASE COMPLETE ALL PARTS AND FIELDS / INCOMPLETE FORMS WILL BE RETURNED

- ASSIGNMENT: [] ATHLETIC EVENT [] MUSIC, THEATRE & DANCE EVENT [] ACADEMIC ADVISOR
[] NON-CREDIT FACILITATOR/LECTURER/SPEAKER [] ADMINISTRATIVE PROJECT
[] SPECIAL EVENT/OTHER

PART I – To be filled out by the supervisor; justification & brief description of duties to be performed and required qualifications must be attached; STIPENDS require written explanation including expected time commitment. Employees may not begin working until they have received a copy of this monthly hiring authorization with full approvals in Section IV below.

Job Assignment/Title: _____

Department: _____ Dept. # _____

Project: _____ Acct: 60254

Period of employment: FROM: ___/___/___ TO: ___/___/___ (may not extend beyond end of fiscal year)
Check One:

[] 1. Hourly (Non-Exempt employees may not exceed 40 hours for week combined with other hours of work)

Hourly Rate: \$ _____ Estimated Hours: _____ (Time record card required)

[] 2. Per Diem (non-HBS); summer employment only – each day will equal 8 hours worked

Per Diem Rate: \$ _____ Estimated Days per Week: _____ (Time record card required)

[] 3. Stipends; may not exceed 12 installments; Total Stipend: \$ _____

Print name of supervisor who will be responsible for approving timesheets (cannot be same as employee): _____

Note: Supervisor is responsible for notifying Payroll and Human Resources immediately upon any change in the employee's status or for unsatisfactory behavior or performance of job duties. Monthly checks are issued on or about the 25th of ea. month.

PART II – To be filled out by employee

Existing PeopleSoft ID: _____

Name: _____

Street: _____ City, State, Zip: _____

Phone: _____ Cell Phone: _____

PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS:

[] Yes / [] No This is my first monthly payroll contract with RIC? If you checked YES, you will be required to complete additional employment forms. If you checked NO, do you have a gap of 3 or more years in monthly employment with RIC? [] Yes / [] No

[] Yes / [] No I am an ERS Retiree collecting benefits; I understand all earnings must be reported to ERS (contact HR)

[] Yes / [] No I am currently working in another department at RIC and/or URI and/or CCRI. If you checked YES, also answer the following: Number of hours working per week or FLH _____; School name, Department Name and Supervisor: _____

I understand that all new or rehired monthly payroll (MP) employees covered by the OPC Policy on Covid-19 Vaccinations must show proof of full vaccination (both doses or J&J) before any new MP employment begins, unless an application for a medical or religious exemption has been submitted and approved. I understand that as an internal monthly payroll employee my assignment may be terminated prior to the end of the authorized period for any reason including but not limited to College priorities, fiscal constraints, job performance, or unacceptable behavior. I understand that I have a continued duty to disclose any information that may impact my employment or my employer. If I work for multiple departments, I understand that total weekly or monthly hours may not exceed the total hours stated in Part I for type of payment selected without HR prior approval. I understand that monthly checks are issued on or about the 25th of ea. month. I further agree and accept all the terms of employment specified in Part I above and any applicable policies governing my employment.

Employee Signature _____ Date: _____

PART III–To be completed by HR: FLSA status: [] Exempt [] Non-Exempt

PART IV - Please sign and forward completed form to next Approver:

Department Chair/Director: _____ Date: _____

Dean/AVP: _____ Date: _____

Human Resources: _____ Date: _____

Budget Office: _____ Date: _____

President or Divisional Vice President: _____ Date: _____

Distribution: Accounting (Original), Human Resources, Budget Office, Initiating Department, Employee 12/21

Entered by: _____ / Audited by: _____

Monthly Hiring Authorization RIC Full-time Employees Only Additional Assignment Instructions

The Monthly Hiring Authorization RIC Full-time Employees Only Additional Limited Assignment Form MP06 is to be used to authorize reimbursement full-time employees who are working either in the same department or another department on limited assignments that is in addition to their regularly scheduled work day or load hours. Limited assignments may include Music, Dance or Theatre events, athletic events, or other special events, special administrative projects, academic advising or counseling, workshop facilitators, lecturer or speaker, etc. Employees may be hired on an hourly basis, per diem or stipend per job or assignment, etc. Stipend payments may not to exceed 12 per assignment.

Additional Assignments for full-time RIC employees only may be renewed without limit as long as any applicable over-time laws are not violated. All payments regardless of terms of employment will be monthly.

Authorizing supervisors will have direct responsibility for monitoring the employee's behavior and performance of the authorized work assignment and immediately report any change in employment status, unacceptable behavior or failure to adequately perform job tasks to the Human Resources. Changes in employment status should also be reported to the Payroll Office in order to prevent overpayments or erroneous payments.

IMPORTANT NOTE: ANY terminations of employment MUST be discussed with HR and approved prior to any action taken.

Procedure:

Part I: The hiring supervisor is required to complete all information in Part I and sign and date the form. All rates of pay and anticipated hours of work must be noted. RIC employees that will be paid either hourly or Per Diem will be required to complete and submit a record of hours/days worked each week. Stipends may not exceed 12 installments and do not require time reporting, however,

In addition, the hiring supervisor must attach the following:

1. Justification for hiring.
2. Brief description of the job duties to be performed and required job qualifications.
3. Stipends explanation (if applicable) including expected time commitment

Send completed forms to the Office of Human Resources.

IMPORTANT: If the supervisor is also the payee, someone other than the supervisor **must** be responsible for approving timesheets.

Part II: The RIC employee is required to complete all information in Part II and sign and date the form and return to hiring Supervisor. **The employee must immediately take steps to comply with the COVID-19 vaccination policy**

Part III: The Human Resources Department will verify FLSA status, if applicable.

Part IV: All applicable approvers must sign and date before the employee begins the assignment.

Two copies of the approved form will be returned to the originating department (1 copy for the department and 1 copy for the employee).

Any questions regarding completion of the form or FLSA status should be addressed to the Office of Human Resources. Upon completion of the form a copy will be returned to the initiation department and employee.