GUS #106 Revised 2/04

Gilroy Unified School District New Employee

						(Classified	() Cer	tificated	() M	anagement ()	
Requ	esting A	dministra	ator									
Employee Name							Social Security #					
Requested Effective Date							Ending Date					
Position Description							Location					
Assig	nment _											
	Hours per day Months per year											
	Hourly Replacement po						position for					
	Substi	Substitute Em			ployee	Leave	Re	esignation	F	Retireme	ent	
	New P	Position Extra duty-Extra pay						-				
	Accou	nt Code	(s):									
	FTE	Fund	Resource	Project Year	Object	Sub Object	Goal	Function	Cost Center	Site	Manager	
					,	, , , , ,						
	Admin						nistrator Signature Date					
#2 (to be completed at Central Office) Categorically Funded						#3	}					
						В	Business Office					
Program Manager Signature Date							Business Office Date					
Program Manager						_ _						
Program Manager						H	Human Resources Date					
			Signature		Date							
#4 (to be completer at Central Office)						S	Salary Information: Class Step					
Date of Interview Interview Panel												
							Bas Ho	se Salary ur	()			
Reference check complete by						_	Day () Month ()					
Cred	dential/Jo	b Require	ement Checl	Name K	Dat	e	Ye:		()			
Technician Signature Date						_ _D	Percentage if less than 100					
							Percentage, if less than 100					
Contract Issued/Signed Date Fringe Benefits/Payroll Forms Date							Current/Retired member of PERS? Yes () No () Current/Retired member of STRS? Yes () No ()					
	rd Approv]	Date		_ `						

Distribution: White – Human Resources Yellow – Payroll Green - Benefits Pink – Business Office Goldenrod – Requesting Administrator