## Buffalo StateCLASSIFIED SERVICE APPOINTMENT FORM

|  |
| --- |
| **Employee Information:** |
| Name: |  |       |       |       |
|  | *Salutation* | *Last Name* | *First Name* |  | *M.I.* |
| Address: |       |       |
|  | *Street Address* | *Apartment/Unit #* |
|  |       |    |       |
|  | *City* | *State* | *ZIP Code* |
| Home Phone: | (   ) |       | Cell Phone: | (   ) |       |

|  |
| --- |
| **Appointment Information:** |
| Effective Date: |       | Termination Date (temps only): |       |
| Budget Title: |       | Grade: |  | Jurisdictional Class: |  |
| Line Number: |       | Salary: $ |       | Pay Mode: |  | FTE: |      |
| Appointment Type: | [ ]  Temporary [ ]  Permanent [ ]  Contingent Permanent [ ]  Probationary [ ]  Shift |
| Department: |       | Account Number: |       |
| Supervisor’s Name:  |       | Expected Total Compensation (temps only): $ |       |
| Essential Service Designation: |  |
| [ ]  Background Check Release (note date HRM confirmed):  |       |

|  |
| --- |
| **Approvals:** |
| 1. Supervisor/Department Head/Chair |  | Date |  | 4. Financial Management (FM) |  | Date |
| 2. Dean/Director/AVP |  | Date |  | 5. Human Resource Management |  | Date |
| 3. Provost/Vice President/CIO |  | Date |  |  |  |  |

|  |
| --- |
| **HRM Use Only:** |
| Civil Service Clearance Code: |       | Civil Service List Title: |       |
| Civil Service List No.: |       | Civil Service Certification No.: |       | Exam Score: |       |
| Previous State Agency: |       |
| Budget Title/Grade: |       | Employment Dates: |       |
| [ ]  SUNY HR | [ ]  NYSTEP | Revised 4/2019 |
| **Distribution:** [ ]  Supervisor/Department Head [ ]  Dean/Director/AVP [ ]  FM [ ]  HRM [ ]  Benefits [ ]  Payroll |