

**CALIFORNIA MARITIME ACADEMY
SPECIAL CONSULTANT AGREEMENT FORM**
(This form MUST accompany the Request for Personnel Action form)

EMPLOYEE INFORMATION

Employee's Name (First - M.I. - Last):	Social Security Number (SSN):
Mailing Address (Number & Street, City, State, Zip):	
Home Phone Number:	E-mail address:

CHECK ALL THAT APPLY

- Current CSU Employee Former CSU Employee PERS/STRS Retiree New CSU Employee

COMPLETE FOR CURRENT CSU EMPLOYEE

Primary CSU Position: Full Time Half Time Fraction _____

1) Will this appointment result in more than 125% employment within the CSU System? Yes No

2) Will this appointment result in an overtime rate based on the employee's primary position? Yes No

3) Is this appointment outside normal CSU work hours? Yes No

If "Yes", complete the following:

- Appointee is taking vacation to complete this assignment (Attach Absence Report, Form 634)
 Adjusted work schedule
 Summer work outside of academic/cruise year appointment

DESCRIPTION OF DUTIES (Be specific, attach Job Description if necessary)

HOW TO PAY

Beginning Date: _____ Ending Date: _____

Daily Rate (required): \$ _____ /day *(Rate cannot exceed daily rate in Section E99 of the CSU Salary Schedule)*

Funding source: General Fund Non-General Fund Grant/contract - non-federal Grant/contract - federal

Are you the Principal Investigator for this grant? Yes No

Justification for daily rate determination: _____

Estimated number of days authorized to work: _____

Maximum payment authorized: \$ _____

Department: _____ Supervisor: _____

This appointment will be consistent with appropriate CSU guidelines and collective bargaining agreements. (Please refer to the CSU Additional Employment Policy and Public Contract Code Restrictions Policy, <http://www.csum.edu/HumanResources/Policies.asp>.)

Supervisor

Date

PRIOR TO EMPLOYEE'S SIGNATURE, REVIEWED BY HUMAN RESOURCES

Human Resources Analyst

Date

EMPLOYEE SHOULD SIGN **AFTER** REVIEW BY HUMAN RESOURCES. I have reviewed and agree to the conditions of this appointment.

Employee Signature

Date