

OLD DOMINION UNIVERSITY
NON-INSTRUCTIONAL PART-TIME FACULTY AUTHORIZATION FORM
(i.e. paid via sub object 4031 – part time only)

(Note: This form must be APPROVED PRIOR to the person being offered employment.
Students cannot be employed as 4031 employees.)

College (if applicable): _____

Department Name and Budget Code: _____

Proposed Employee's Name: _____

Is this person a current Old Dominion University employee in another capacity? __Yes __No
If yes, type of employee:

wage staff classified staff administrative faculty

full time teaching full time research faculty adjunct faculty

4031 in _____ (department)

Proposed period of employment: Begin date _____ End date _____

Proposed hours per week: _____