



Human Resources

Additional Assignment (Internal Dual)

This form is for full-time staff only.

USC ID Full Legal Name

Requesting Department Code Location

Internal Title

Supervisor Name Supervisor USC ID

Effective Date Expected End Date

Exempt Non-exempt

Standard Hours per Week

Standard Days of the Week Standard Times

Total Salary or Hourly Rate \$ Estimated total for appointment \$

Note: Non-exempt staff must be compensated at the time-and-a-half rate for additional assignments.

Description of Additional Assignment

Accounting Information

Dept Fund Class Split %

Dept Fund Class Split %

Name:

Signature:

Date:

Employee:			
Requesting Supervisor:			
Additional Approver:			
Primary (Home Dept.) Supervisor:			

Submit completed form to Human Resources. For employees who report to Academic Affairs, submit completed form to Academic Affairs.

If form is submitted after the effective date listed above, a late memo indicating reason and prevention plan must be attached.