



Marshall University Research Corporation Personnel Action Request - HOURLY

Note: This form must be executed and approved for every HOURLY employee **PRIOR to employee's first day of work.**
Please forward completed form to MURC. Questions may be directed to MURC Payroll (304) 696-2830
It is the employee's responsibility to contact the MURC Payroll department to arrange an appointment to discuss
MURC's policies and complete necessary paperwork before the employee can be paid.

U.S. CIS requires that I-9 must be completed within 3 days of start of employment

Office Use Only
Position Number
Position Class

Action Other Change

Employee Information				Job Information							
Last Name	<input type="text"/>	First Name	<input type="text"/>	MI	<input type="text"/>	Position Title	<input type="text"/>				
MU ID#	<input type="text"/>	SSN	<input type="text"/>	Birth Date	<input type="text"/>	Effective From	<input type="text"/>	To	<input type="text"/>		
Gender	<input type="text"/>					New Hourly Rate	<input type="text"/>	Old Hourly Rate	<input type="text"/>		
Race	<input type="text"/>					Est. Hours per Week	<input type="text"/>	Encumbrance Amt	<input type="text"/>		
Address:	<input type="text"/>					Labor Distribution (attach additional pages, if necessary)					
Home Phone	<input type="text"/>	Work Phone	<input type="text"/>		MURC Fund:	<input type="text"/>	MURC Org:	<input type="text"/>	<input type="text"/>	%	
Email	<input type="text"/>					MURC Fund:	<input type="text"/>	MURC Org:	<input type="text"/>	<input type="text"/>	%
<input type="checkbox"/> MU Undergraduate Student <input type="checkbox"/> MU Graduate Student <input type="checkbox"/> Non-Student						MURC Fund:	<input type="text"/>	MURC Org:	<input type="text"/>	<input type="text"/>	%
						MURC Fund:	<input type="text"/>	MURC Org:	<input type="text"/>	<input type="text"/>	%

Remarks

Certification / Approval

I certify that this employee is is not related to any other employee currently working on fund(s) listed above*

*If a relationship exists, please contact Bruce Day (696-4303), Director of MURC Office of Research Integrity, for information about potential conflicts of interest.

Project Director _____ Date _____

Research Corporation _____ Date _____

Department Contact Person Phone

Employment with MURC is voluntarily entered into, and the employee is free to resign at will at any time, with or without cause. Similarly, MURC may terminate the employment relationship at will at any time, with or without cause.

Acceptance of the appointment is signified by signing and dating below. Employment is at the "will and pleasure" of the Marshall University Research Corporation and is subject to the availability of funding.

Employee Signature (must have original signature) _____ Date _____