

AMERICAN UNIVERSITY OF BEIRUT
RECOMMENDATION FOR ACADEMIC APPOINTMENT (Part Time)

TO: Director of Human Resources*****F c>

 (First Name) (Middle Name) (Last Name)

Department _____

To the position of _____

Effective date _____ Termination date _____

New Position Replacement of _____ Renewal

Period of annual service required: 9 months 11 months Other _____

Nature of Appointment:
 P.T. %

Proposed Monthly Salary L.Leb. _____

Supervisor's Name _____ Supervisor's ID Number _____

 Date of Previous Employment at AUB

 AUB ID Number

1	Fund Class	Fund Source	Account	Org.	Function	Program	Activity

Sequence	Percent %

1	PTAEO Project	PTAEO Task	PTAEO Award	PTAEO Expense	PTAEO Org.

2	Fund Class	Fund Source	Account	Org.	Function	Program	Activity

Sequence	Percent %

2	PTAEO Project	PTAEO Task	PTAEO Award	PTAEO Expense	PTAEO Org.

3	Fund Class	Fund Source	Account	Org.	Function	Program	Activity

Sequence	Percent %

3	PTAEO Project	PTAEO Task	PTAEO Award	PTAEO Expense	PTAEO Org.

Recommendation for Appointment

Nationality of Candidate _____ ""I tggp'Ectf 'aaaaaa

Any other Nationality _____

Candidate's Age_____ Date of Birth _____ Married Single Other _____

Remarks _____

I have explained these terms to the appointee who has indicated his/her intention to accept them. I have made it clear that the terms become effective only when confirmed by signed contract, and after appointee has passed a physical examination.

Date

Approved:

Budget Approval:

Date

Comptroller

N.B Submit in duplicate with the supporting documents.

Copy of the recommendation will be returned to Office of the Dean with the signed letter of Appointment.