



Employment Confirmation – Associate Faculty

Butte-Glenn Community College District

TO: Human Resources

FROM: _____
 Department Chair / Coordinator – Please print

 Date

 Signature

STOP: If the attached application does not have the red HR Approval stamped on the front, please do not process any further and forward to Human Resources for initial approval.

VOCATIONAL EMPLOYMENT	ACADEMIC EMPLOYMENT
Please submit with the attached application: Transcripts, letters verifying experience, and Employment Packet	Please submit with the attached application: Transcripts and Employment Packet. IF INTERN Also, attach a letter from the applicant's academic advisor stating that the applicant is at least half way through their academic program and are in good standing. Additionally, the intern form must be completed and attached.

The following individual is to be employed for the:
 Fall
 Winter Intersession
 Spring
 Summer Semester - 20____
 Starting Date of Class: _____
(Please check one above)

CONTACT INFORMATION			
Name (Last, First, MI)	Social Security Number	Colleague ID Number	
Mailing Address	City, State, Zip Code		
Home Phone	Business Phone	Campus Mail Drop	

COURSE INFORMATION				
Dept. Code	Course No.	Course Title	Hrs/Wk	General Ledger No.
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				- - - - -
				- - - - -

CANDIDATE MUST GO TO HUMAN RESOURCES IN PERSON