

TEMPORARY EMPLOYMENT SERVICES



TES REQUEST FORM

To request a temporary employee in your respective department, **type the requested information in the fields below**, save to your Documents folder, and then submit the completed form to testime@auburn.edu.

CHECK IF YOU NEED APPLICATIONS _____

Employee Name: _____ Banner #: _____

Department: _____

Hire Date: _____ End Date: _____ Est. Hours per Week: _____

Hourly Pay Rate: _____ Driving AU vehicle in this position (Y/N): _____

Supervisor's Name _____ Banner #: _____

Requested by: _____

Please briefly describe the duties to be performed:

TES OFFICE USE ONLY

Position: 723 _____

MP end date: _____

Home Org: _____

Hours at hire: ~ _____

Distribution Org: HR _____

Revolving Door: _____

District Code: _____

Restricted: _____

Campus Code: _____

ID/Parking: _____

Location: _____

B/C sent: _____