

**AMERICAN UNIVERSITY OF BEIRUT
RECOMMENDATION FOR NON-ACADEMIC APPOINTMENT**

TO: Director of Human Resources

Date:

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

To the position of: _____

(Title)

Grade: _____

Effective date: _____ Termination date (if applicable): _____

New Position Replacement of _____ Renewal

Promotion Transfer

AUB ID Number (if previously employed at AUB): _____

Proposed Monthly Salary (L.L.): _____

Supervisor's Name _____ Supervisor's ID Number _____

Additional Benefits Recommended: If any (explain) _____

(For Budget Approval)

1	Fund Class	Fund Source	Account	Org.	Function	Program	Activity	Sequence	Percent %

1	PTAEO Project	PTAEO Task	PTAEO Award	PTAEO Expense	PTAEO Org.	Date From	Date To
Benefits							

2	Fund Class	Fund Source	Account	Org.	Function	Program	Activity	Sequence	Percent %

2	PTAEO Project	PTAEO Task	PTAEO Award	PTAEO Expense	PTAEO Org.	Date From	Date To
Benefits							

3	Fund Class	Fund Source	Account	Org.	Function	Program	Activity

Sequence	Percent %

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

Date From	Date To

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.

Approved:

Budget Approval:

Comptroller

Date

N.B.: Submit with this form the Job Description of the position