Columbia Basin College

Human Resources

EMPLOYMENT ACTION NOTICE – PART TIME HOURLY

Part-time Hourly Positions (object AD, AH)

(Hourly positions are not intended for students enrolled in six credits or more)
(Students enrolled in six credits or more must be processed through the student employment office)

Position Title _____ Pay Rate _____
Work Site Location _____ Mail Stop _____ Budget Code _____

EMPLOYMENT STATUS

POTENTIAL ELIGIBILITY FOR RETIREMENT (Eligibility Worksheet/Department of Retirement System Criteria)

1. Does this position ever require work for 70 hours or more per month?

❒ **Yes** If yes, go to next question. ❒ **No** If no, position not eligible for PERS or TRS retirement at this time.

2. Does this position require work for 70 hours or more per month for five or more months during the 12-month academic year (September through August) period?

❒ **Yes** If yes, go to next question. ❒ **No** If no, position not eligible for PERS or TRS retirement at this time.

3. Is the position established on an ongoing basis (not a project position with an expected termination date)?

❒ **Yes** If yes, position appears to be eligible. ❒ **No** If no, position may not be eligible for PERS or TRS retirement at this time.

4. If employed in this position, will the employee work in more than one position for CBC?

❒ **Yes** If yes, explain below. ❒ **No**

POTENTIAL ELIGIBILITY FOR HEALTH INSURANCE

1. Does this position ever require work in excess of 80 hours per month?

❒ **Yes** If yes, go to next question. ❒ **No** If no, position not eligible for insurance at this time.

2. Will this position require work in excess of 80 hours per month for six (6) or more consecutive months?

❒ **Yes** If yes, see below. ❒ **No** If no, position not eligible for insurance at this time.

If Yes, an evaluation of this position is necessary for potential eligibility as per new rule which became effective January 1, 2010. Please contact Lori Hafner at ext. 2557 to set up an appointment.

CBC EMPLOYMENT VERIFICATION

This form must be completed, signed, and submitted to Human Resources before the individual can begin working. If part-time employee is known, please fill out this section to the best of your ability.

Employee name _____

Starting date _____Termination date (if known)_____

Work Hours: Start:_____ End:_____

Is this individual currently employed in a part-time position(s) within the College? ❒ No ❒ Yes

Was this individual previously employed in a part-time position(s) within the College during the last 12 months? ❒ No ❒ Yes
If yes to either, please specify:

Position_____ Dates _____

Supervisor's signature _____ Date _____

Vice President's Signature _____ Date _____

Director for Human Resources signature _____ Date _____

PLEASE COMPLETE AND RETURN TO HUMAN RESOURCES OFFICE (MS-A2)