|  |  |
| --- | --- |
| **Requesting Unit:** |  |

INSTRUCTIONS

**Student Sporadic employment definitions:**

* Sporadic additional employment for student employees is defined as:
  + Above 40 Scheduled Weekly Hours for undergraduate students
  + Above 30 Scheduled Weekly Hours for 2nd year graduate students
  + Above 20 Scheduled Weekly Hours for 1st year graduate students
* **All Student Sporadic additional employment is hourly pay rate and non-exempt**
* Many student employees have additional jobs that do not meet the sporadic additional job definitions. **This form should only be completed when the combination of a student employee’s concurrent jobs place them above the Scheduled Weekly Hours thresholds listed above.**
* See the [Workday Sporadic Employment – Student WPO](https://utexas.app.box.com/file/339196720355) for processing instructions

**Student Employee Sporadic Additional Job Form:** HR Partner of proposed additional job completes Sections I & II. Section III is reviewed and signed by employee, requesting & primary job manager, and requesting & primary HR Partner/Executive.

For Graduate Academic student employees, please e-mail form to [*graduate\_studies@utlists.utexas.edu*](mailto:graduate_studies@utlists.utexas.edu)accompanied by a petition from the student’s program adviser supporting the work above the 20/30 Hour Limit.

SECTION I

**Job Details:** Requesting HR unit, complete the add job details:

|  |  |
| --- | --- |
| Employee Name (EID): |  |
| Reports to (Sup Org): |  |
| Job Title/Job Code (Job Profile): |  |
| Effective Date: |  |
| End Date: |  |
| Estimated Hours per Week: |  |
| Hourly Rate ($/hour): |  |
| **\***Overtime Eligible (Y/N): | Choose an item. |
| *(Overtime Eligible: If the add job duties are similar to the primary job, the employee is eligible for*  *Overtime)* | |

SECTION II

Click or tap here to enter text.

**Job Description for Additional Job:** Requesting HR unit, in the space below, please provide the essential functions of the employee’s additional job. Attach job description if preferred.

SECTION III – **(Employee Additional Job Acknowledgement)**

As a condition to your employment with the University of Texas at Austin (UT Austin), you are required to acknowledge the following:

* I acknowledge that all other employment, at UT Austin or another institution within The University of Texas System (UT System), has been disclosed in writing to **all my managers.**
* I acknowledge that I will disclose any anticipated future employment at UT Austin or UT System. This disclosure will be made in writing **to all my managers** before anticipated future employment begins. I further acknowledge that anticipated future employment may impact my employment with the University and that impact may include a reduction of hours or termination of my employment.
* **[If any of my departments have work-hour limitations]** I acknowledge that I will not work more than  hours per week, on average, for any week in which I accrue hours, for all my UT Austin and UT System positions combined, without prior approval **from all my managers.**
* I acknowledge that this document does not state all the requirements or terms of my employment, and that my managers will advise me of additional policies and procedures specific to my positions.
* Failure to complete or comply with the acknowledgements in this document is cause for withdrawal of an offer of employment or, if employed, for discipline, up to and including termination.
* If a **sporadic job**, I acknowledge that work in all sporadic jobs cannot exceed more than 120 hours or $25,000 in a fiscal year.

***Please, sign and date in the fields below.***

**Requesting Unit Signatures (Add Job):**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Employee Name | Employee Signature | Date |
|  |  |  |
| Requesting Unit, Manager Name | Requesting Unit, Manager Signature | Date |
|  |  |  |
| Requesting Unit, HR Partner Name\* | Requesting Unit, HR Partner | Date |
|  |  |  |
| Requesting Unit, HR Exec. Name\* | Requesting Unit, HR Executive Signature | Date |

**Primary Unit Signatures:**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Primary Manager Name | Primary Manager Signature | Date |
|  |  |  |
| Primary Unit, HR Partner Name\* | Primary Unit, HR Partner | Date |
|  |  |  |
| Primary Unit, HR Exec. Name\* | HR Executive Signature | Date |

\*CSUs determine policy for required signatures.