

HUMAN RESOURCES

Tide Hall • Seaside, CA 93955 Tel: (831) 582-3389 humanresources@csumb.edu

Special Consultant Agreement

Form must be submitted to Human Resources ten (10) working days prior to start date.

The Special Consultant classification may be used for part-time AY faculty year round and full-time AY faculty during academic breaks. Current full/part-time staff employees must attach an approved Additional Employment Pre-Approval (AEP) Form with this Special Consultant Agreement (SCA).

**AEP form not required for part-time faculty, grants managed by University Corporation, or if all work occurs on non-contract dates. **

If consultant is not a current employee, new hire process (i.e. submitted resume and background check) must be completed prior to start of appointment.

California State University's Definition of a Special Consultant:

"Special consultants perform special assignments of a temporary nature, based on a particular knowledge, ability, or expertise. This classification should be used for work that meets the "exempt" criteria of the Fair Labor Standards Act (FLSA) and is **not** to be used for non-exempt work. Special Consultants perform administrative studies, make appropriate recommendations, conduct oral briefings of study results, and prepare written reports. Special Consultants may also work with the personnel of an organization to implement a desired plan of change, providing the necessary coordination guidance, and training." Faculty appointments must comply with the CSUMB guidelines, CSU Policy, and applicable Collective Bargaining Agreements.

Consultant Name: Employee ID:		Employee Classifi	Employee Classification:	
Requester of Special Consultant:		Work: On-Campus	Off-Campus	
Гуре of Appointment: П New	☐ Change to Existing Agreement*	Position #:	☐ New Position	
Start Date:	End Date:	Revised End Date:		
Appointing/Funding Department and	d ID#:	Check S	Sort #:	
Hourly Rate**: \$	# of Hours Authorized to Work:	Max Payment Authorized: \$		
Funding Department's College Anal	lyst (Signature):			
Description of change, duties, assign	nments, tasks, and/or deliverables (attach add	ditional information if needed).		
A.C. HD.				
After HR completes the approval pro	ocess, please send copy of SCA to:			
•	onsultant definition, guidelines, and pro		-	
	pointment (if applicable). This appointm nes, CSU Policy, and applicable Collect		ill be consistent with	
For new hires: I understand that	t this appointment is subject to the satis	factory completion of a backgroun	nd check, which	
includes education and employm	nent verification as well as a criminal ba	ackground check.		
Sancial Comp. Heart (Signature)		D (G'		
Special Consultant (Signature)	Date	Requester (Signature)	Date	
Requester's Department Chair or		Funding Dean or Appropriate	Date	
Manager (Signature)		Administrator (Signature)		
Budget Officer (Signature)	Date	Vice President (Signature)	 Date	
(1.6.1.1.1)		(- 6)		
	Human Resources Use Onl	ly <u>:</u>		
Reviewed by:	Date backg	Date background check completed:		
Entered by:		Date Entered: Employee Record #:		
× ('b an a a in fine din a a anna a an hl				

^{*}Change in funding source or hourly rate requires a <u>new</u> Agreement signed by all parties.

^{**}A standard rate for service may be paid as determined by the Dean/Appropriate Administrator, but cannot exceed the hourly rate for the Special Consultant Classification.

Instructions for Completing Special Consultant Agreement

Form must be submitted to Human Resources ten (10) working days prior to start date.

Current full-time faculty and full/part-time staff employees <u>must attach</u> an approved Additional Employment Pre-Approval (AEP) Form with this Special Consultant Agreement (SCA). **AEP form not required for part-time faculty, grants managed by University Corporation, or if all work occurs on non-contract dates. **

If consultant is not a current employee, new hire process (i.e. submitted resume and background check) <u>must be completed prior</u> to start of appointment. The Requester or Requester's ASC is responsible for completing the items in italics and routing this form.

Consultant Name: Enter employee name.

Employee ID: Enter employee ID number (not Otter ID).

Employee Classification: Select Faculty or Staff from the drop down menu.

Requester of Special Consultant: Enter the name of the person who is requesting the Special Consultant and will verify work to be

completed.

Work: Indicate whether the work will be completed on- or off-campus.

Type of Appointment: Check "New" or "Change to Existing Agreement*."

Position #: Enter the position number for this Special Consultant. If you need a new position number, check the box next to "New

Position."

Start Date: Enter the start date of the assignment. (Must be 10 days after the submission of the form.)

End Date: Enter the end date of the assignment.

Revised End Date: If making a change to an existing assignment, enter the revised end date of assignment.

Appointing/Funding Department and ID #: Enter the name and ID number of the Department or Program appointing or funding the

Special Consultant.

Check Sort #: Enter the Check Sort ID number.

*Hourly Rate***: Enter Hourly Rate to be paid to the Special Consultant.

Hours Authorized to Work: Enter the total number of hours that the Special Consultant is permitted to work.

Max Payment Authorized: Enter the maximum amount of compensation that can be earned by the Special Consultant.

THE ABOVE ITEMS MUST BE REVIEWED BY THE APPROPRIATE COLLEGE ANAYLST BEFORE FORWARDING FOR FUNDING DEAN/APPROPRIATE ADMININSTRATOR SIGNATURE.

Description of change, duties, assignments, tasks, and/or deliverables (attach additional information if needed): Enter a detailed description of what the assignment will entail. Please be specific with regards to expected deliverables from Consultant. If you need additional space, please feel free to attach additional documents. AY faculty enter any non-contract dates when work will occur.

After HR completes the approval process, please send copy of SCA to (name(s)): Provide list of who should receive copy of approved Agreement once approval has been received from Human Resources. Form Routing

Form Routing - Please allow sufficient time for obtaining signatures.

- 1. Requester or Requesting Department's ASC completes information and forwards to Special Consultant for signature.
- 2. Special Consultant Signature: Employee signs and returns the signed form to Requester's ASC.
- 3. ASC routes form to Requester for signature.
- 4. **Requester Signature:** Requester signs and returns the signed form to ASC.
- 5. Requester's ASC routes form to Requester's Department Chair or Manager for signature.
- 6. **Requester's Department Chair or Manager Signature:** Requester's Department Chair or Manager signs and returns to Requester's Department ASC.
- 7. Requester's Department ASC forwards SCA to Funding Department's College or Division Analyst.
- 8. **Funding Department's College Analyst**: Reviews payment and position information and signs.
- 9. Analyst forwards SCA to Funding Dean or Appropriate Administrator for signature.
- 10. **Funding Dean or Appropriate Administrator Signature:** Funding Dean or Appropriate Administrator signs. **Note:** This is the Dean of the College or VP of the Division that is providing the funds for the additional employment.
- 11. Funding Dean or Appropriate Administrator's Office sends completed form with all signatures to Provost's Office.
- 12. Budget Officer and Vice President sign and send completed form to Human Resources.
- 13. Human Resources Use Only: HR will process the form and provide copies to the requested parties.

^{*}Change in funding source or hourly rate requires a $\underline{\textit{new}}$ Agreement signed by all parties.

^{**}A standard rate for service may be paid as determined by the Dean/Appropriate Administrator, but cannot exceed the hourly rate for the <u>Special</u> Consultant Classification.