

Instructions: To be completed by department, signed by Division Level, Executive Level, then submitted via email to benefits@du.edu.

Employee Name				Date of Hire	
Employee DU ID				Faculty	Staff Grant
Position #	Suffix #	Home Org #		Home Org Name	
Created by		Date		Phone #	

If any dates changes, please contact the Human Resources Benefits team

Parental Leave

If this position is grant funded on Parental Leave, please indicate which 10000 FOAP information the individual will be paid from

Fund	Org	Acct	Prog
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Please indicate the FOAP information for the replacement pool

Fund	Org	Acct	Prog
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Approximate Begin Date	Approximate End Date
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Approving Signatures

Department Level	Date	Division Level	Date
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Executive Level	Date	Human Resources Benefits	Date
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