

Temporary Employment Confirmation

COLLEGE DISTRICT	Professional Ex	kpert	Short-Term	Sub	ostitute	
	☐ Job Desc	ription (r	nust be attached f	or all positions)	
Employee Name:	Colleague ID:					
BUDGET ACCOUNT:	POSIT		TION ID:		OPC Office use only	
BUDGET ACCOUNT:	POSIT		'ION ID:		Earn Type:	
DATES OF EMPLOYMENT:	Beginning		Ending	F	Pay Rate:	
Dates must be less than a	9-month period (Ed Code	Section 8	8003 – 75% of a coll	ege year) examp	le: July 1 – March 31.	
Professional Expert: Object Code minimum wage is \$16.00/hr. All pa Short-Term or Substitute: Object employees are placed on Step 1 of the step of the	y rates are subject to approve code must be 2410 for instruc	val by the O	ffice of People & Cultudes or 2310 for all other	ire.	·	
Position title:			If substitute, absent employee/title:			
Specialized Knowledge/Skills t Project/Description of duties –	o be performed:					
Troject/Description of duties –	(See attached is not sur					
BOARD APPROVAL DATE:	(OPC must app	rove all hir	es prior to being place	d on the PCA for	Board approval)	
Employing Supervisor/Colleague ID/Date:			Dean approval/Colleague ID/Date:			
Timecard approver/Colleague I	D/Date:	_	President/Vice Cha	ancellor/Chancel	lor/Date:	
* 4	***** TO BE C	COMPLETI	ED BY EMPLOYEE *	* * * * * * * * * *	*	
MAILING ADDRESS:						
	P.O. Box/Street No.		City	State	Zip	
TELEPHONE: SOC SEC NO:						
Retirement System: STRS:	Yes No Retired	_ PER	S: Yes No	_ Retired (Other:	
I/We understand that YCCD C and that I must have the YCCD I-9, Demographic, CalPERS Exclu in order for my employment to be I have read the employment confirm short-term, or substitute employee, permanent status. I understand that	Temporary Classified ap sion, and the YCCD Marke official and for me to be pai ation set forth above and acce I am NOT entitled to healt	plication, letplace Cove d. ept employn h and welfa	EEO statement, W-4 erage Options forms of the terms stated are benefits due regular	Federal tax form n file with the Offi herein. I understan	, DE - State tax form ce of People & Culture dt that as a professional expert,	
Signature of Employee				Date		

Revised: 11/2024

OPC approval: Yes No Initials: _____ All required documents must be provided to OPC prior to the employee starting work