

POST INSTRUCTOR CONTRACT FOR NON-STATE EMPLOYEES

*The following needs to be completed and submitted to POST
within 2 days of instructing:*

- AJ/AL Employee Agreement
- Statement of Ineligibility
- I-9 Form
- Employee Personal Information
- FI 21 Form/Voiced Check
- Form W-4
- Copy of Drivers License
- Copy of SSN Card

If you have any questions please call Lt. Breur at 801-554-5452 or
Chelsey Mason 801-256-2310

Attached, you will find a bi-weekly time sheet and the pay periods for
the Department of Public Safety.



State of Utah
Department of Human Resource Management

AJ/AL EMPLOYEE AGREEMENT

Pursuant to statute (UCA:67-19) and the Utah Department of Human Resource Management

Rules, this notice hereby specifies that the _____
Agency/Dept

has appointed _____ ; herein referred to as "the employee",
employees name

Address: _____
city state zip

SSN: _____ on _____ as a _____
position

Job Code # _____ In an _____ temporary schedule.
AJ/AL

The employee will work _____ hours/week at a reate of \$ _____ per hour.

The temporary appointment shall commence on _____ And is limited in duration as
explained below. The employee will not receive benefits.
~~will~~

Schedule AJ employees are not eligible for benefits; benefits for schedule AL employees are optional per management discretion. Schedule AJ employees working half time or greater are limited by DHRM Rules to a maximum of 1560 hours in any consecutive twelve (12) month period. AJ employees working less than one-half time do not have a limitation on the duration of their employment. Schedule AL employees are limited to working a maximum of two (2) years or the time period of a funding limited project. The employee is here advised that the above temporary schedule position is exempted by law from the rights of a merit career service position and the employee is appointed and works at the will and pleasure of the hiring agency. The employee can be released from his/her appointment at any time without explanation and without just cause.

I have read and do understand the provisions contained in this notice of appointment.

Employee Signature

Date

Agency Representative

Date