UC ANR ACADEMIC HUMAN RESOURCES (AHR)
Post-Retirement Appointment
Recall to Active Service - Rehire Request Form

Appointee's Name:_____

ANR Unit *(Payroll Home Dept)*:_____ Position Location:_____

Appointment Period:_____

Title, Rank, and Step at Retirement:_____

Appointment Monthly Percent Time:_____

Provide the following funding information:

COA : _____ %: _____ Effective Period: _____

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COA : _____ %: _____ Effective Period: _____

☐ **Please attach a justification summary with plan of work activities including all impacts and outcomes.**

Check if one or more of the following apply to the request:

☐ Principal Investigator (PI) Status

☐ Access to Donor Account(s)

☐ Staff Supervision Assistance

☐ Administrative Support

☐ Office Space

☐ Other:_____

The Academic Human Resources Unit will:

☐ Draft Appointment Letter

☐ Add Job Code: _____

☐ Identify FLSA Status: _____

Comments: _____

Please allow 45 days for processing

Reviewed by:

_____
Program/REC/County Director or Immediate Supervisor   Signature   Date

_____
Financial Officer   Signature   Date

Academic HR Manager	Signature	Date

Vice Provost	Signature	Date

Approved by:

Associate Vice President	Signature	Date