

STRONG STAFFING

INFORMATION REQUIRED FOR TEMPORARY EMPLOYEES
For Divisions 01 and 02

Contact name:	_____
Telephone Extension:	_____
Contact Fax Number:	_____

| Temporary's Job Title : _____

Job duties (*Especially computer skills needed and specifically what the temp will be performing- not necessarily the duties of the position vacated*) :

Company Code	FAO #	Spend Category
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Department name: _____

Account#: _____

Start date: _____

End date: _____

Work schedule: _____

Supervisor: _____

Telephone Extension: _____

Fax Phone Number: _____

Room#: _____

Building: _____

Box#: _____

Reason for temp?: _____