***Please type information***

Incumbent name:       Effective Date of Appointment:

Title:  Research Associate  Senior Research Associate  Research Scientist

Prior approval for Specialized Technical Skills (STS) classification:  Yes  No

Current salary: $       Proposed salary: $       % increase:

Status:  Full-time  Part-time:       (FTE)  Check if change in status

Source(s) of Funding:        Check if changes in funding

***List speed types and % allocation***

Have changes been made to the job description?  Yes  No

This position, ideally, should be fully funded on CWRU grants and/or serve in CWRU-funded research roles such as CWRU-based research cores. Positions employed by CWRU should perform duties in CWRU space or in a space where CWRU research is conducted and should be supervised by a CWRU employee, usually a faculty member. Please refer to the RA/SRA/RS Policies and Procedures for additional guidance.

**Please attach the following documents:**

* completed RA/SRA/RS Annual Activity & Review form
* job description (highlight any changes from previous job description)
* current curriculum vitae
* J1 or H1 visa application (if applicable

Visa Status (if applicable):  H1B or  J-1 Current Expiration Date (if applicable):

Lawful Permanent Residency (Green Card) Application Status:   NA

     

Department Chair, Division Chief and/or Center Director Department/Center (include Division if applicable)

Supervisor Name, Phone number and Email address

Department Administrator Name, Phone number and Email address (Primary Contact)

**Chair Signature Date**

*By signing I verify that appropriate funding is available for this appointment.*

Received by SOM Human Resources: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ To Finance & Planning \_\_\_\_\_\_\_\_\_\_\_\_\_\_ To Review Panel \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approved by RA/SRA/RS Committee (SOM HR Signature)** Date Department Notified

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office of Finance & Planning Approval** Date

For use Office of Faculty Affairs and Human Resources Only: Received by FAHR \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval Signature (date)

To Finance & Planning \_\_\_\_\_\_\_\_\_\_\_\_\_ To Review Panel \_\_\_\_\_\_\_\_\_\_\_\_\_ Department Notified \_\_\_\_\_\_\_\_\_\_\_\_\_

For use Office of Finance & Planning Only: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval Signature Date

For use Office of Faculty Affairs and Human Resources Only: Received by FAHR \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval Signature (date)

To Finance & Planning \_\_\_\_\_\_\_\_\_\_\_\_\_ To Review Panel \_\_\_\_\_\_\_\_\_\_\_\_\_ Department Notified \_\_\_\_\_\_\_\_\_\_\_\_\_

For use Office of Finance & Planning Only: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval Signature Date