

UMBC Contingent I Contract Checklist

Confirm the following information is completed:

I. Page 1: Position Information / Departmental Request

- ☐ **Request Type (Select ONE):** Initial Request *OR* Renewal
- ☐ **Position Number**
NOTE: For renewals, the department can provide the existing position number if they have it. Can be left blank if information is unavailable.
*if a position number **is available** the payroll preparer will provide a position. If a position number **isn't available**, please continue filling out the contract and the payroll preparer will submit a request to HR for a new position number.*
- ☐ **Department Number**
- ☐ **Job Title**
- ☐ **Department Name**
- ☐ **Pay Rate**
- ☐ **Payment Method:** Hourly ^{OR} Zero Comp (Stipend or Grant-Funded Role)
- ☐ **Appointment Type:** If and When Needed *OR* Temporary
- ☐ **Employee Classification:** Non-Exempt (Hourly) *OR* Exempt *OR* Zero-Comp (Stipend or Grant-Funded)
- ☐ **Contract Duration:** Start Date *AND* End Date
NOTE: Contract duration must not exceed 6-months.
- ☐ **Hours Per Week**

Employee & Supervisor Details:

- ☐ Employee's Full Legal Name:
- ☐ Employee ID (*if applicable*)
- ☐ Employee's Email:
- ☐ Supervisor's Name:

II. Page 2: Employee Information / Department Signatures

PLEASE NOTE: *The nepotism section needs to be completed by the EMPLOYEE only. Background and fingerprint check needs to be completed by the Department POC.*

Background Check Status (For Renewals Only):

- ☐ *If Yes, Type of check previously completed (Select Commercial or Fingerprint)*

Fingerprint Check Requirement (For New Hires)

- ☐ Does this position interact with minors (not including UMBC students)? (Select Yes or No)
If Yes, Check Reason Below (Select all that apply and specify 'Other' if necessary):
- ☐ Select Program
- ☐ Department Payroll Preparer Signature and Date
- ☐ Department Payroll Approver Signature and Date

III. Page 3: Nepotism Disclosures / Employee Acknowledgment**Nepotism Disclosure:**

- ☐ Family members/relatives who currently work at UMBC? (Select Yes or No)
- ☐ **Family Member List (If Yes):** Name, Title, Relationship, Dept

Employee Acknowledgment:

- ☐ Employee Signature and Date

IV. Required Attachments

- ☐ Resume/Application (Required for initial requests)
- ☐ Summary of Duties, Education/Experience/Special Skills description
- ☐ Attachment of the ad/posting (If recruitment went through PageUp)