University of West Georgia Authorization for Employment (ATE) for Part-Time Faculty

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	nool:		Departm	ent:							
Applicant Name:						CIP Code:	CIP Code:				
roposed A	ppointment Date:		Proposed Rar	nk/Title:							
Other employment for UWG, USG or eCampus:											
greement	Regarding Complete	of Degrees	S:								
pplicant:	Is Related to a	Is Related to a Current University of West Georgia Employee									
	Is Conversant	Is Conversant in English									
	Highest Degree	Has Bee	n Verified								
	Lives AND Wor	ks Out of	State				- <u></u>				
	Retired from th	e Universi	ty System of Georg	ia							
	If retired, pleas	e specifiy	retirement company	/:	Date	of Retirement:					
				TRS Approved:	Date	e of approval:					
unding P	osition Number:		Pay	/ Amount: \$							
Home Der	partment ID		Fundin	g Department Cha	rt String						
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 Funding A	pproved: Lucretia T.	Gibbs A	STRP AA	Date							
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