HR USE ONLY: POSITION NO. _____ **ASSIGNMENT BEGIN DATE:** _____ **END DATE:** _____

COMPENSATION REQUEST FOR A TEMPORARY EMPLOYEE PERFORMING OFFICER-IN-CHARGE DUTIES

COMMANDANT OF CADETS							HUMAN RESOURCES		
Employee Name	SSN	Barrack 1 Charge Amt. Account No. 328114	Barrack 2 Charge Amt. Account No. 328112	Barrack 3 Charge Amt. Account No. 328113	Barrack 4 Charge Amt. Account No. 328115	Total Salary	Earning Code	Salary Rate	Annual Salary

_____ Authorized

_____ Date

FORM HR-114

STOP - COMPLETE THIS FORM, PRESS PRINT, OBTAIN AUTHORIZED SIGNATURE AND FORWARD TO THE HUMAN RESOURCES DEPARTMENT. IF YOU NEED MORE THAN 1 PAGE, PROOF READ THIS PAGE AND PRESS PRINT, THEN PRESS CLEAR FORM.

Clear Form **Print**