



USC Aiken Additional Assignment/Job (Internal Dual) Request Form

To Be Completed by Requesting (Secondary) Department		
USC ID:	Employee Name: (Last, First, Middle)	
Dept # (Ex. 911625):	Department Name:	
Duration and Compensation		
Effective Dates:	Hours: (X:XX AM/PM)	Hourly Rate or Salary:
From:	From:	
To:	To:	
Provide a detailed description of the duties, including course numbers if teaching.		
Signatures		Dates
Employee Signature:		
Requesting Department Head Signature:		
Home Department Head Signature:		