

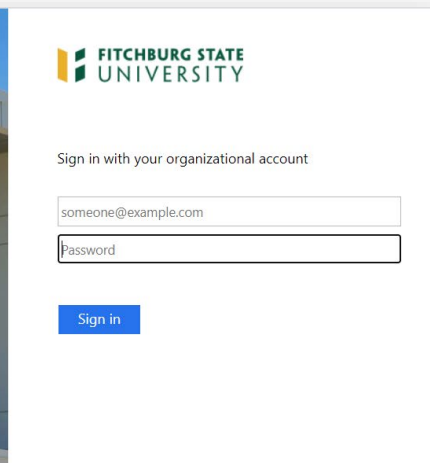
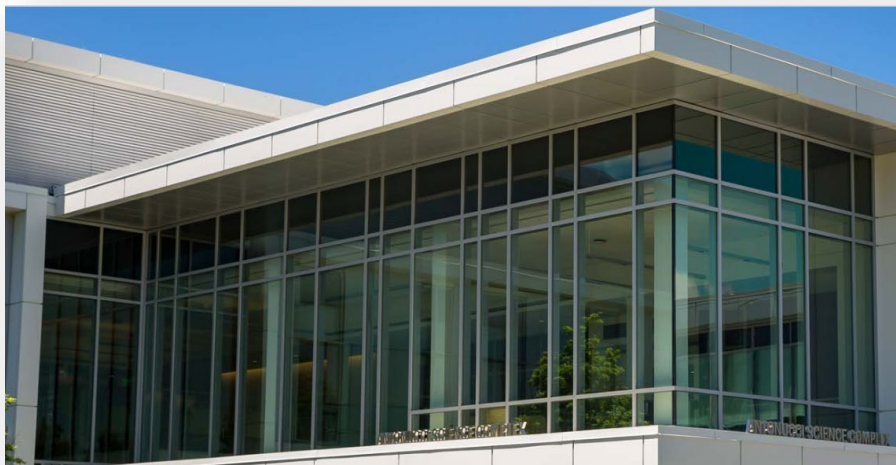
## **Rehiring Non-Benefited PT Contractors or Adding a Payroll Record for Full Time Employees**

The Standard Contract is now a dynamic form and can be completed electronically making the rehire process seamless.

### **Standard Contract**

If rehiring Non-Benefited PT Contractors (NBPTC) that **have not had a break in service** (break in service means 12 months or more) you just need to complete the Standard Contract. (\*\*If hiring current FT benefited employee you would use the same Standard Contract) that can be found on our website or by clicking here: [Standard Contract](#)

*The Representative from Department initiates the Standard Contract. Clicking on the above link will bring you to the sign in page; log in using your Falcon Key credentials.*




**FITCHBURG STATE UNIVERSITY**

Sign in with your organizational account

*The first section is Completion by Contractor, please scroll down to **Completion by Hiring Department** section. You will need the following information in order to fill out the form:*

- The contract employee's @fitchburgstate.edu email address
- Department
- Fiscal Year
- FOAPAL
- Contractor Title
- Contract start and end dates and the first day of work
- Rate of Pay
- Scheduled Hours / Week
- Maximum Hours / Week
- Maximum Contract Obligation
- Description of Work
- SSTA Approver (who will be approving time for the contractor)
- Department Manager's Name and Email (if you are the Department Manager you may enter your own information)

Timer  
43:30  
\* = required field



**STANDARD CONTRACT**  
without CORI

**HUMAN RESOURCES & PAYROLL SERVICES**

Hiring Department: Complete the supervisor section and use the contractor's **Fitchburg State email address** then sign electronically and submit.  
 Contractor: Complete the contractor section using your **legal name** (which appears on your government issued ID). Review the Commonwealth terms and Conditions, then sign and submit.

**Completion by Contractor**

Contractor Legal Name:  Employee ID (if known):

Contractor Preferred Name:

Have you ever held another position at Fitchburg State or another state agency in the Commonwealth of Massachusetts?  Please Select

[Click here.](#) (right click and open in a new window) to read the Commonwealth Terms and Conditions.

\* By checking this box, IN WITNESS WHEREOF, The Contractor certifies under the pains and penalties of perjury that it has clicked on and reviewed the link above and shall comply with the Commonwealth Terms and Conditions for any applicable Contract executed with the Commonwealth as certified by their authorized signatory below.

**Completion by Hiring Department**

Contractor's Fitchburg State Email Address:

Department:  Fiscal Year:

Contractor Title:  FOAPAL:

Contract Start Date:  1st Day of Work:

Contract End Date:

Rate of Pay: \$  Pay is Per:

Scheduled Hours / Week:  Maximum Hours / Week:  Maximum Contract Obligation:  # of Teaching Credits (FACULTY ONLY):

Description of Work (Please be as detailed as possible)

SSTA Approver:

Department Manager Name:

Department Manager Email:

Representative from Department initiating this form:

(click to sign)  Name:

Signature  Date  Title:

Once the Completion by Hiring Department section is complete scroll down to **Representative from Department initiating this form**, click to sign, and then click **Submit Form**.

**Completion by Hiring Department**

Contractor's Fitchburg State Email Address: \*

Department: \* Fiscal Year: \*

Contractor Title: \* FOAPAL: \*

Contract Start Date: \* 1st Day of Work: \*

Contract End Date: \*

Rate of Pay: \$ \* Pay is Per: \* [-- Please Select --]

Scheduled Hours / Week: \* Maximum Hours / Week: \* Maximum Contract Obligation: \* # of Teaching Credits (FACULTY ONLY): \*

Description of Work (Please be as detailed as possible)

SSTA Approver: \*

Department Manager Name: \*

Department Manager Email: \*

Representative from Department initiating this form:

\* (click to sign) Name: \* Kimberly Page

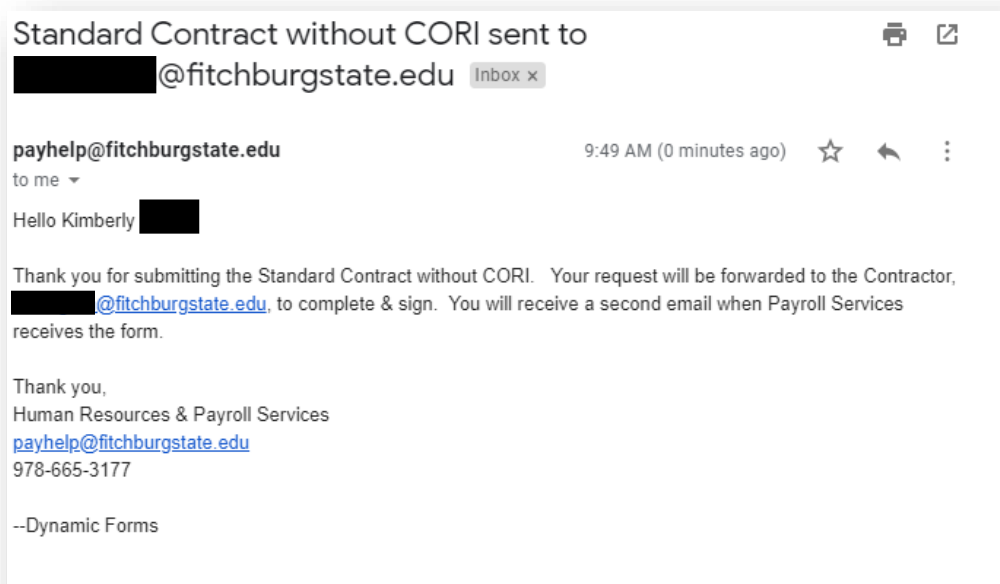
Signature Date Title: \*

Contractor Signature: Date Department Manager Signature: Date

Payroll Services Signature Date

Save Progress Submit Form

After submitting the Standard Contract, the **Representative from Department initiating this form** receives the following email:



*The Employee receives an email to complete the standard contract. (Example below)*

----- Forwarded message -----  
From: <[payhelp@fitchburgstate.edu](mailto:payhelp@fitchburgstate.edu)>  
Date: Thu, Jul 2, 2020 at 9:49 AM  
Subject: Standard Contract Form requires your attention  
To: <[REDACTED]@fitchburgstate.edu>

Congratulations on your position!

Kimberly [REDACTED] at Fitchburg State University has submitted a Standard Contract form for you to sign.

Once Payroll receives your Standard Contract they will begin the hiring process.

If you have any questions, please contact Kimberly [REDACTED]

Thank you,  
Human Resources & Payroll Services  
Fitchburg State University  
[payhelp@fitchburgstate.edu](mailto:payhelp@fitchburgstate.edu)  
978-665-3177

[Click here to complete your section of the form.](#)

Once the employee completes the **Completion by Contractor** section, the form will be sent to the Department Manager. The department manager receives the following email and must **Click here to complete your section of the form**:

Hello Jessica [REDACTED]

A Standard Contract - no COR/ form has been signed by Kelli [REDACTED] for Kimberly [REDACTED].

Please review and sign to show approval (link below). The form will then be sent to Payroll Services to hire the contractor.

**Summary of information:**

Dept Representative: Kimberly [REDACTED]

Dept Mgr: Jessica [REDACTED]

Department: Human Resources & Payroll Services / Researcher

Contractor: Kelli [REDACTED] [@fitchburgstate.edu](mailto:[REDACTED]@fitchburgstate.edu)

Contract Start/End Dates: 07/01/2020 - 06/30/2021

1st Day: 07/13/2020

Thank you,

Human Resources & Payroll Services

Fitchburg State University

[payhelp@fitchburgstate.edu](mailto:payhelp@fitchburgstate.edu)

978-665-3177

--Dynamic Forms

[Click here to complete your section of the form.](#)

Department manager **signs** the Standard Contract then clicks **Submit Form**. You will receive another email once Payroll receives the contract to be processed.

**Completion by Contractor**

Contractor Legal Name: \* Kimberly [redacted]

Employee ID (if known): [redacted]

Contractor Preferred Name: Kim [redacted]

Have you ever held another position at Fitchburg State or another state agency in the Commonwealth of Massachusetts? \* Yes [dropdown]

[Click here.](#) (right click and open in a new window) to read the Commonwealth Terms and Conditions.  
\*  By checking this box, IN WITNESS WHEREOF, The Contractor certify under they pains and penalties of perjury that it has clicked on and reviewed the link above and shall comply with the Commonwealth Terms and Conditions for any applicable Contract executed with the Commonwealth as certified by their authorized signatory below.

**Completion by Hiring Department**

Contractor's Personal Email Address: \* [redacted]@gmail.com

Department: \* Human Resources & Payroll Services Fiscal Year: \* FY 2021

Contractor Title: \* Researcher FOAPAL: \* D061 3455 456 2345 D061

Contract Start Date: \* 07/01/2020 1st Day of Work: \* 07/13/2020

Contract End Date: \* 06/30/2021

Rate of Pay: \$ \* 25.00 Pay is Per: \* Hour [dropdown]

Scheduled Hours / Week: \* 10 Maximum Hours / Week: \* 15 Maximum Contract Obligation: \* 2500.00 # of Teaching Credits (FACULTY ONLY): [redacted]

Description of Work (Please be as detailed as possible)  
\* Research remote hiring practices.

SSTA Approver: \* Kelli [redacted]  
Department Manager Name: \* Kim [redacted]  
Department Manager Email: \* [redacted]@fitchburgstate.edu

Representative from Department initiating this form:  
\* [redacted] ...3037373732  
Signature: *Kimberly [redacted]* Date: 07/02/2020, 2:31 PM  
Name: \* Kimberly [redacted]  
Title: \* Director of Human Resources

**Completion by Human Resources**

\*  Human Resources has conducted the CORI/SORI.

\* [redacted] ...3130323033  
Contractor Signature: *Kimberly [redacted]* Date: 07/02/2020, 2:57 PM  
\* [redacted] ...3330323531  
Department Manager Signature: *Kimberly [redacted]* Date: 07/02/2020, 3:19 PM  
Human Resources Signature \_\_\_\_\_ Date \_\_\_\_\_ Payroll Services Signature \_\_\_\_\_ Date \_\_\_\_\_

Save Progress Reject **Submit Form**

The Hiring manager receives the following email, once the employee signs the Standard Contract and it is with Payroll to be processed.

