## e-PAF Hiring Manager Access Form

The purpose of this form is to grant hiring manager rights to those supervisor/manager who will be responsible for overseeing, monitoring and approving e-pafs. Your confidential discretion is strongly advised. Please complete form and submit to HRIS: <a href="https://example.com/HR-Payroll-Processing@luc.edu">HR-Payroll-Processing@luc.edu</a>. Please allow 48-72 hours for processing.

Hiring Manager Name:		
Hiring Manager Job Title:		
Hiring Manager Signature:		
Employee ID:	Employee Email:	
Is this hiring manager replacing another?	Yes No	
If yes, name of old approver:		
Work Location No:	Replace Existing Access	Append to Existing Access
*If your department is not listed, please choos	e "OTHER", print the form an	d manually write in your department code.
Supervisor Name:		
Supervisor Signature:		

\*By signing this form you agree in taking full accountability and responsibility in approving e-paf's in a timely manner.