



**Instructions**

As of March 30, 2020, all designated essential faculty, staff, and student employees who will be working on campus must receive written approval from the President, Chief of Staff, Provost, or CFO.

**Contact Information**

Dept/College: \_\_\_\_\_ Date: \_\_\_\_\_

Dept/College Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

**Employee Information**

Employee Name: \_\_\_\_\_

Employee R#: \_\_\_\_\_ Employee Title: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Faculty       Staff       Student Employee

**Justification**

1. Is the position immediately critical to meeting/sustaining on-campus safety or operations?  
 Yes     No

2. How will this position support immediate on-campus safety or critical operations?

3. Approximate number of days/hours per week requesting to be on campus.

**College/Department Approval**

Dean/AVP Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**On Campus Essential Employee Designation**

Designation Approved     Designation Declined

President, Chief of Staff, Provost, or CFO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All approved forms will be sent back to the requesting department with a copy sent to Human Resources ([hr.imaging@ttu.edu](mailto:hr.imaging@ttu.edu)).