



Data Entry Request - Affiliates

NOTE: All requests must contain this form, and Affiliate Demographic Form, and additional paperwork as detailed below.

General Information

Date Submitted: _____ Submitted by: _____

Department: _____ Phone: _____ Email: _____

Name of new hire: _____

Affiliate Information

Please explain reason for giving this person this affiliate role: _____

Desired Start Date: _____ Desired End Date: _____ Affiliate's Home Org Code: _____

Signature of Dept. Head or Dean: _____

Affiliate Role (select one):

| AFFILIATE ROLES | | |
|-------------------------|---|--|
| ROLE NAME | ROLE DESCRIPTION | ADDITIONAL PAPERWORK |
| AFIL FACULTY CNM | CNM Faculty (teaching introductory studies) | ADF & memo from CNM Coordinator |
| AFIL FACULTY LAT | Letter of Academic Title (LATs) / Adjunct faculty | ADF & LAT form |
| AFIL FACULTY LAT INTL | International Letter of Academic Title (LATs) / Adjunct faculty (never on campus) | ADF & LAT form |
| AFIL FACULTY ROTC | ROTC instructors not paid by UNM | ADF & LAT form |
| AFIL REGENT | University Regent | ADF (assignment on file) |
| AFIL ACADEMIC COLLEAGUE | Visiting academic colleague; not a LAT | ADF & letter from Chair |
| AFIL VOLUNTEER KUNM | KUNM Volunteer | ADF & letter from KUNM Volunteer Coordinator |

Date Entered: _____ Entered By: _____

UNM ID: _____ Email Sent: _____

Comments: _____