



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: _____