WESTAFF
TEMPORARY HELP REQUISITION
CONTRACT NUMBER 4400008674
Effective 2/29/2016

FAX TO: 337-993-5739
Date: **Agency AGPS (PO) Order Number: _____**

HR Manager: Paul Thomas **Phone: 337-482-6247** **Fax: 337-482-1452**

Email address: recruitment@louisiana.edu

Requesting Office:

RFP Job Title: (See Specifications for Temporary Services)

#- Start Date: **Anticipated End Date:**
Working Hours

Other Authorized Signatures: _____

Immediate Supervisor: **Email:**

Phone Number: **Fax Number:**

Work Site Address:

Bill to:

ATTN: Phone# Fax#

Address: **PO Box**
Lafayette, LA 70504 -
Email:

_____ **VP, Admin & Finance** _____
Signature **Title** **Date**

FOR WESTAFF USE ONLY

WESTAFF OFFICE LOCATION: _____ BRANCH #: _____ CUSTOMER #: _____

Pay Rate: $_____ Bill Rate: $_____ Job Code: _____

Employee Assigned: _____ SSN #: _____

Emp.'s Phone #: _____ Results: _____ Start Date: _____