

## Essentia Personne Acknowledgment

Employee Name:	Employee ID:
Department:	Department ID:
Title:	
Supervisor:	
Position #:	This employee fills an OPS/temporary positic
Please provide a justification for this	sition being designated as essential:
The abovedesignated mployeewill be	responsible for the following:
event that an emeggcy or disast or for other events deeme	esignatioto maintain or restore inversity operations in the ster forces suspension of classes and/or closing of offices, dappropriate by the USF President. As such, Essen port to work instructed by their supervisor.
is closedto the public; however	fing isannounced, it ill normally indicate that the University ver, designated Essentia Personnelare required to handle ay arise too conduct business that cannot be postponed or
Completing training requireme	ents in accordance with USF Policy 6-037.
Regulations and Policies, and any	an emergency will be administered consistent with Univers applicable federal or Florida Hailing to attend to the designated EssentialPersonnemay result in appropriate ng, termination.
This form shall be completed at the tir Essential Personnel duties.	me of koireupontransfer/reassignmeimtto a position requiing
Employee Signature:	Date:
Supervisor Signature	
	Date:

Retain original form fordepartmental filesprovide a copy to the employee, and send digitally to <a href="mailto:usf-emergencymgmt@usf.edu">usf-emergencymgmt@usf.edu</a>