

FACULTY


STAFF

# PERSONNEL ACTION FORM

Adjunct Faculty

UNDERGRAD/GRAD STUDENT

(Shaded areas DO NOT apply)

1	NAME (LAST, FIRST, MIDDLE INITIAL)				COLLEGEID	SOCIAL SECURITY NO	EFFECTIVE DATE									
	TYPE OF PERSONNEL ACTION(S) - COMPLETE SECTIONS LISTED FOR ACTION(S) CHECKED.															
NEW HIRE <input type="checkbox"/>		REHIRE <input type="checkbox"/>	ADD'L SERVICES <input type="checkbox"/>	ONE CHECK ONLY <input type="checkbox"/>	CHANGE IN PAY RATE <input type="checkbox"/>	CHANGE IN ACCOUNT <input type="checkbox"/>	CORRECTION <input type="checkbox"/>	CHANGE IN PER STATUS <input type="checkbox"/>	PROMOTION <input type="checkbox"/>	TRANSFER <input type="checkbox"/>	LEAVE OF ABSENCE <input type="checkbox"/>	VOLUNTARY SEPARATION <input type="checkbox"/>	INVOLUNTARY SEPARATION <input type="checkbox"/>	COMPUTER USE ONLY <input type="checkbox"/>	RETIREMENT <input type="checkbox"/>	The sections indicated under each selection are mandatory completion.
2	FULL-TIME BENEFIT ELIGIBLE <input type="checkbox"/>	PART-TIME BENEFIT ELIGIBLE <input type="checkbox"/>	PART-TIME NO BENEFITS <input type="checkbox"/>	CASUAL/ON CALL/TEMP NO BENEFITS <input type="checkbox"/>	TEMPORARY <input type="checkbox"/>	REGULAR <input type="checkbox"/>	HOURS PER WEEK	HOURS PER DAY	MONTHS PER YEAR	HOURS PER YEAR						
	EMPLOYEE WORK LOCATION (BUILDING)				ROOM	PHONE-OFFICE	SUPERVISOR									
	JOB TITLE				RANK LEVEL	DEPARTMENT-PROJECT			COLLEGE-DIVISION							
	HOURLY		BI-WEEKLY		RATE OF PAY MONTHLY		ANNUAL		ACCOUNT NUMBER(S)-SUB ACCOUNTS		PAY PERIOD START		EFFECTIVE DATES END			
2	FULL-TIME BENEFIT ELIGIBLE <input type="checkbox"/>	PART-TIME BENEFIT ELIGIBLE <input type="checkbox"/>	PART-TIME NO BENEFITS <input type="checkbox"/>	CASUAL/ON CALL/TEMP NO BENEFITS <input checked="" type="checkbox"/>	TEMPORARY <input type="checkbox"/>	REGULAR <input type="checkbox"/>	HOURS PER WEEK	HOURS PER DAY	MONTHS PER YEAR	HOURS PER YEAR						
	EMPLOYEE WORK LOCATION (BUILDING)				ROOM	PHONE-OFFICE	SUPERVISOR									
	JOB TITLE				RANK LEVEL	DEPARTMENT-PROJECT			COLLEGE-DIVISION							
	HOURLY		BI-WEEKLY		RATE OF PAY MONTHLY		ANNUAL		ACCOUNT NUMBER(S)-SUB ACCOUNTS		PAY PERIOD START		EFFECTIVE DATES END			
EXPLANATION																
	5	REASON					LAST DAY WORKED			UNUSED VACATION DAYS						
DEPARTMENT-PROJECT			ACCOUNT NUMBER	COLLEGE-DIVISION			JOB TITLE									
STREET ADDRESS FOR FORWARDING (IF DIFFERENT FROM CURRENT)				CITY			STATE		ZIP							
6	LAST DAY WORKED	EXPECTED RETURN DATE	ACTUAL RETURN DATE	EARLY RETURN <input type="checkbox"/>	RETURN ON TIME <input type="checkbox"/>	EXTENSION <input type="checkbox"/>	WORKER'S COMP?									
	LEAVE OF ABSENCE FORM: <input type="checkbox"/> RECEIVED <input type="checkbox"/> PENDING					TYPE OF LEAVE: <input type="checkbox"/> MEDICAL <input type="checkbox"/> SABBATICAL <input type="checkbox"/> PERSONAL <input type="checkbox"/> MILITARY										
7	PI/PROJECT DIRECTOR/EMPLOYEE			DATE	DEPARTMENT HEAD/DIVISION HEAD/PROJECT DIRECTOR				DATE							
	DIRECTOR OF SPONSORED PROGRAMS			DATE	VICE PRESIDENT/DIRECTOR				DATE							
	VICE PRESIDENT OF BUSINESS AND FINANCE			DATE	OTHER (IF APPLICABLE)				DATE							
	PRESIDENT			DATE	HUMAN RESOURCES				DATE							
9	STUDENT EMPLOYMENT PAYROLL USE ONLY													COMPTROLLER'S USE ONLY		
	A	NAME (LAST, FIRST, MIDDLE INITIAL)			STREET ADDRESS							BUDGET				
X	CITY				STATE	ZIP CODE	MONTH	DAY	YEAR	PAYROLL						
	TAX CODES															
D	CLASSIFICATION CODE	LOCATION CODE	PAY FQ CODE	PAY RATE CODE	PAY RATE	MARITAL STATUS	FEDERAL EXEMPTIONS	STATE EXEMPTIONS	FED	FICA	STATE	CITY	COUNTY	SCHOOL DISTRICT	SUB ACCOUNT	DATE RECEIVED