



Personnel Action Form

Name: _____ Employee Id: _____ Effective Date: _____ (Beginning of pay period)

Reason for Change: New Hire Transfer Promotion Other: _____

Personnel Action	From:	To:
Job Title		
Department		
Budget Account <small>List multiple accounts if necessary</small>		
Immediate Supervisor		
Type of Employment <small>Full-time, Part-time, Temporary *temporary positions must include dates of assignment</small>		
Classification <small>Faculty, Adjunct, Administrator, Staff, Work-study</small>		
Employment Status: Exempt or Non-Exempt		
Scheduled Hours per week: <small>40, 35, 19, or other</small>		
Rate of Pay <small>list biweekly rate for exempt or hourly rate for non-exempt</small>		
Expected employment term: <small>12 months, 9 months, or other</small>		
Other		
Notes Please include any necessary explanations, including name of employee being replaced for position vacancies.		
For Non-Faculty		
Compease Job Grade		
For Faculty		
Contract Start Date		End Date
Degree: <small>Doctoral, Master's, Bachelor's, or Associate</small>		Post-grad hours
		Years of Experience
Level		Step
Supplement 1 <small>Description, budget code</small>		Supplement 2 <small>Description, budget code</small>

Chair/Direct Supervisor _____ Date: _____

Dean's Approval _____ Date: _____

Executive Approval _____ Date: _____

Director of Human Resources _____ Date: _____

President's Approval (FT Positions) _____ Date: _____