

PERSONNEL ACTION REQUEST

Print on 4-part Reverse Paper only. May be ordered from Publications and Printing.

Action <input type="checkbox"/> Hire/Rehire <input type="checkbox"/> Change <input type="checkbox"/> Separation <input type="checkbox"/> Leave of Absence <input type="checkbox"/> Return from LoA <input type="checkbox"/> Promotion/Reclass Effective Date of Action FT Faculty Contract Type <input type="checkbox"/> 10 months <input type="checkbox"/> 12 months	Employee Type Class I: <input type="checkbox"/> Faculty <input type="checkbox"/> Benefitted Bi-Weekly Staff <input type="checkbox"/> Administrative Classes II and III are temporary employment only. Class II: <input type="checkbox"/> Student Assistant <input type="checkbox"/> Casual Labor <input type="checkbox"/> Federal Work Study <input type="checkbox"/> SRAP Class III requires a new PAR each semester. Class III: <input type="checkbox"/> Part-Time Faculty <input type="checkbox"/> Graduate Assistant <input type="checkbox"/> Resident Assistant
HR/Budget Use Only <input type="checkbox"/> Refresh Position	
_____ Job Code / BCAT _____ Pay Group	

Last Name _____	First Name _____	MI _____	SSN/ADP ID _____
Complete the following section for hire, change in status, or change of current information.			
Hire: <input type="checkbox"/> Initial Hire at UWG <input type="checkbox"/> Rehire <input type="checkbox"/> also Employed at _____			
Change: <input type="checkbox"/> Salary <input type="checkbox"/> Title <input type="checkbox"/> EFT <input type="checkbox"/> Home-Department <input type="checkbox"/> Supervisor <input type="checkbox"/> Chart String Coding			
Home Department _____	Home Department ID _____	ADP Supervisor _____	Supervisor's ADP ID _____
540 _____	ADP Position Number _____	Job Title _____	EFT (Class I only) _____
Annual Salary _____ <small>For Faculty and Administrative</small>	Hourly Rate _____ <small>For Staff, SA, FWS, Casual Labor, SRAP</small>	Semester Rate _____ <small>For Class III Employees</small>	

Chart string(s) where expenditures occur:						
Dept _____	Fund _____	Acct _____	Program _____	Class _____	Project _____	Amount _____
Dept _____	Fund _____	Acct _____	Program _____	Class _____	Project _____	Amount _____

Budget Use Only ADP Payroll Distribution Code _____ / _____
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Separation Last Work Day _____ <input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/> End of Contract <input type="checkbox"/> Discharge <input type="checkbox"/> Lack of Work <input type="checkbox"/> Death	HR Use Only VPO
Leave of Absence (leave reports must be submitted accordingly) <input type="checkbox"/> Paid Leave <input type="checkbox"/> Personal Leave <input type="checkbox"/> Medical Leave (Documentation Required) <input type="checkbox"/> Unpaid Leave <input type="checkbox"/> Military Leave (Documentation Required) <input type="checkbox"/> Family Medical Leave (Documentation Required)	
Date Leave Begins _____ Approximate Return Date (return PAR required) _____	

Comments _____

Action Initiated By _____ Phone _____ Date _____

Required Approvals:

All Classes: Department Approver _____ Date _____

Biweekly/Admin Classification/Salary Review: HR _____ Date _____

Class I & III in Academic Departments: Dean _____ Date _____

Class I Hires/Promotions/Reclass: VP _____ Date _____

Class I Hires/Promotions/Reclass: President _____ Date _____

FWS: Financial Aid/Graduate Students: Graduate School _____ / _____ Date _____

Budget Services _____ Date _____