



PERSONNEL ACTION FORM (PAF)

INSTRUCTIONS FOR COMPLETING THIS FORM ARE FOUND ON THE [HR WIKI](#) (login required)

EMPLOYEE	Name of Employee: _____ Position Number: _____
	SSN (new employee only) or SPU ID Number: _____ Date of Birth: _____
	Department: _____ Building: _____ Room: _____ Suite: _____ Phone: _____

PERSONNEL ACTION	Initial Appointment	One-Time Payment or Bonus (<i>please explain and complete Compensation Detail, Budget Detail, and Authorization sections only</i>):	
	Revised Appointment		
	Hire to Replace Employee on Leave		
	Promotion		
	Reclassification (<i>attach completed classification review</i>)		
	Title Change (<i>complete start date, job title only</i>)		Other/Details:
	NEW Position (<i>attach required supporting documentation</i>)		
	Budget Distribution Change (<i>complete Budget Detail only</i>)		

POSITION STATUS	FTE: _____ Prior FTE (if current employee): _____ Start Date: _____ End Date: _____
	Job Title: _____
	Reports To (<i>Name</i>): _____ (<i>Title</i>): _____
	Replaces (<i>name of former employee holding position</i>): _____
	Name of Department Head/Dean: _____ Name of Area Vice President: _____

CLASSIFICATION	Staff:	For HR use only:	Faculty: Rank: _____ Step: _____
	Regular Temporary		One year appointment
	Full-Time Part-Time		On Tenure Track
	Non-Exempt Staff		Non-Tenure Track
	Exempt Staff		Tenured

PERIOD OF SERVICE (REQUIRED)	Required Please check one option, enter the number of months <u>and</u> indicate the dates that the regular employee will normally be employed.			
	NOTE: nonexempt staff or mid-month starts are not eligible for deferred pay			
	<u>Example:</u>			
	10 mo - Start: Mo <u>09/1/2014</u> (1st day of the mo) End month <u>06/30/2014</u> (last day of the mo)	Paid over 12 mos	Paid over 10 mos	
	10 mid mo Start: Mo/Day <u>08/18/2014</u> End Mo/Day <u>06/19/2015</u>	Paid over 10 mos	n/a	
	11 mo- Start: Mo <u>08/01/2014</u> (1st day of the mo) End mo <u>06/30/2015</u> (last day of the mo)	Paid over 12 mos	Paid over 11 mos	
		Default Election	Circle option below if preferred	
	10 mo - Start: Mo _____ (1st day of the mo) End month _____ (last day of the mo)	Paid over 12 mos	Paid over 10 mos	
	10 mid mo Start: Mo/Day _____ End Mo/Day _____	Paid over 10 mos	n/a	
	11 mo- Start: Mo _____ (1st day of the mo) End month _____ (last day of the mo)	Paid over 12 mos	Paid over 11 mos	
11 mid mo Start: Mo/Day _____ End Mo/Day _____	Paid over 11 mos	n/a		
12 mo fiscal year: Mo/Day _____ July 1 _____ Mo/Day _____ June 30 _____	Paid over 12 mos	n/a		
Other: _____ Number of months, Start _____ End date _____	Paid over the number of months			

PLEASE REPEAT EMPLOYEE'S NAME: _____

COMPENSATION DETAIL

Annual Base Salary \$ _____ (required)

Monthly Salary \$ _____ (required)

Hourly Rate \$ _____ (for non-exempt, short hour and temporary)

Shift Differential \$ _____ (if applicable)

One-Time Payment/Bonus Amount of \$ _____

BUDGET DETAIL

SALARY DRAWN FROM:
 If budget change form is required, is it attached? Yes No Comments _____

Fund	Organization	Account	Activity	Amount	Percentage
_____	_____	_____	_____	\$ _____	_____ %
_____	_____	_____	_____	\$ _____	_____ %
_____	_____	_____	_____	\$ _____	_____ %
_____	_____	_____	_____	\$ _____	_____ %

ALLOWANCES

	POSN	EARN Code	Fund	Organization	Account	Activity	Amount
Auto	AL99__	CAR	_____	_____	60203	_____	\$ _____
Housing	AL9989		_____	_____	60201	_____	\$ _____
Food	AL9988	BRD	_____	_____	60202	_____	\$ _____
Spouse Food	AL9990	BRD	_____	_____	60202	_____	\$ _____
Laundry	AL9976	MSC	_____	_____	60133	_____	\$ _____
Moving*		MCA	n/a	n/a	n/a	n/a	\$ _____
Other			_____	_____	_____	_____	\$ _____

 Vice President of Business and Finance (for moving allowance approval) Date _____

AUTHORIZATIONS

 Person Completing Form (required) Date _____

 Department Head / Dean (required) Date _____

 Senior Vice President / Vice President (for all Exempt positions; any position FTE and/or salary increase) Date _____

 Provost (all faculty or all Exempt positions in this area; any position FTE and/or salary increase) Date _____

 Vice President of Business & Finance (all FTE increases, all salary increases of 10% or more) Date _____

 President (all director level or above, all VP Area of Business & Finance FTE & salary increases of 10% or more) Date _____

OFFICE USE

Budget Verification by _____ on _____ (date)

NBAJOBS entered by _____ on _____ (date) ZEAEBSE: Finance **Faculty** Provost (PEAFAC) Finance

ppaidn peaempl ftmactv nbaposn zeaebse pdabene I-9 W-4 entered by _____

Position confirmation: Signed Offer Letter **OR** Departmental Confirmation **OR** Human Resources on _____ (date) _____