

HUMAN RESOURCES ACTION FORM

Employee: _____

HR Eff. Date: _____

Title: _____

Program/Dept: _____

Reason for Action:

- Payment
- Adjunct/Mentor/IS Payment
- Change
- Termination
- Other: _____

Payment/Pay Rate Change

Rate/Amount: \$ _____

- Hourly
- Annually

- Lump Sum Payment
- Multiple Payments
(see below)

Pay Code: _____

- Undergraduate
- Graduate

*DEPT Code: _____

Budget Code: _____

of Payments: _____

Pay Date Effective: _____

Last Pay Date: _____

Multiple Payment Schedule:

	<i>date</i>	\$ <i>amount</i>		<i>date</i>	\$ <i>amount</i>

Notes: _____

Position / Status Change

Reason for Change:

- Promotion/Change
- Add'l Position/Appt
- Other: _____

New Title: _____

New Status:

- Exempt
- Non-Exempt

	Status	DTO	Hol/DisHol
✓	Full Time – 40 hrs	6.46 / 168	8.0
	Full Time – 34 hrs	5.49 / 142.8	6.8
	Full Time – 32 hrs	5.17 / 134.4	6.4
	Part Time -20 hrs	3.23 / 84	4.0

Authorizations:

Supervisor/Budget: _____ Date: _____

Human Resources: _____ Date: _____

Dir. Financial Svcs: _____ Date: _____

VP of Finance: _____ Date: _____