



This form is best utilized when completed electronically in MS-Excel, but it may be printed and completed by hand.

<b>Appointment:</b>				
<b>Employee Name:</b>		<b>Social Security #:</b>	<b>Employee ID #:</b>	
<b>Department #:</b>	<b>Position #:</b>	<b>Effective Date:</b>	<b>Appointment End Date:</b>	<b>Record #:</b>
<b>Department Name:</b>		<b>FTE:</b>	<b>Percent of Time:</b>	<b>Appointment Type:</b>
				<input type="radio"/> Regular <input type="radio"/> Temporary
<b>Appointment Action: (Check all that Apply)</b>				
<input type="checkbox"/> Abolish Position	<input type="checkbox"/> Change Title/Description	<input type="checkbox"/> Job Reclassification	<input type="checkbox"/> Pay Rate Change	<input type="checkbox"/> Short Work Break
<input type="checkbox"/> Additional Job	<input type="checkbox"/> Data Change	<input type="checkbox"/> Leave of Absence-Paid	<input type="checkbox"/> Position Change	<input type="checkbox"/> Summer Appointment
<input type="checkbox"/> Change FTE/%-Time	<input type="checkbox"/> Discretionary Pay	<input type="checkbox"/> Leave of Absence-Unpaid	<input type="checkbox"/> Rehire	<input type="checkbox"/> Termination
<input type="checkbox"/> Change Funding Source	<input type="checkbox"/> Faculty Promotion	<input type="checkbox"/> New Hire	<input type="checkbox"/> Return from Leave	<input type="checkbox"/> Transfer
<input type="checkbox"/> Change in Reports to	<input type="checkbox"/> Fill Vacant Position	<input type="checkbox"/> New Position	<input type="checkbox"/> Return from Work Break	<input type="checkbox"/> Other (Explain in Comments)
<b>Job Code:</b>	<b>Job Title:</b>	<b>Appointing Authority:</b>	<b>Reports To: (position#)</b>	
<b>Hazardous Materials Handling and Exposure (check all that apply to this position)</b>				
<input type="checkbox"/> Hazardous Chemicals	<input type="checkbox"/> Radioactive Materials/Ionizing Radiator	<input type="checkbox"/> Infectious Materials/Human Blood or Bodily Materials/Recombinant		
<b>Compensation:</b>				
<b>Pay Group: Check</b>	<b>Pay Frequency: Check One</b>		<b>Pay Rate:</b>	
<input type="radio"/> BW <input type="radio"/> MON	<input type="radio"/> Hourly <input type="radio"/> Monthly	<input type="radio"/> Biweekly (Salaried)	<input type="radio"/> Contract (See Below)	
<b>Contract Pay Type :</b>				
<input type="radio"/> Faculty 9/12 - 9 month contract paid over 12 months		<input type="radio"/> Fall Contract - paid over September thru December (4 payments)		
<input type="radio"/> Faculty 9/9 - 9 month contract paid over 9 months		<input type="radio"/> Spring Contract - paid over January thru May (5 payments)		
<input type="radio"/> Other Contract - paid over specified date period (list dates below)		<input type="radio"/> Summer Contract - paid over specified date period		
Other Contract Begin Date:		Other Contract End Date:		
<b>Leave of Absence/Termination Data:</b>				
<b>Leave Begin Date:</b>	<b>Expected Return Date:</b>	<b>Termination Reason:</b>	<b>Termination Date:</b>	
<b>Funding Distribution:</b>				
<b>Funding Begin Date:</b>	<b>Speed Type:</b>	<b>Percent of Funding:</b>	<b>OR \$ Amount:</b>	<b>Funding End Date:</b>
Sum of all partial funding amounts must be <b>100%</b>				
<b>Comments:</b>				
<b>Requestor Signature:</b>		<b>Requestor Comments:</b>	<b>Date</b>	
<b>Department Approver Signature:</b>		<b>Approver Comments:</b>	<b>Date</b>	
<b>Dean Signature:</b>		<b>Dean Comments:</b>	<b>Date</b>	
<b>Chancellor/Vice Chancellor Approval</b>		<b>Chancellor/Vice Chancellor Comments:</b>	<b>Date</b>	
Attach supporting documentation and send completed form to: Personnel Office, Campus Box MH5				
Edit Date: 08/28/2006				