



Personnel Action Form

Name: _____ **Effective Date:** _____ **Salary Review Date:** _____

Title: _____ **PI:** _____ **Employment Date:** _____

<p>New Hire</p> <ul style="list-style-type: none"> New Position Replacement Re-Hire Reinstatement Increase in Hours Decrease in Hours Transfer Salary Adjustment Position Reclassification Position Change Workforce Reduction Layoff/Furlough 	<ul style="list-style-type: none"> Leave of Absence (Personal Medical Other) Termination: Last Day Worked: Resignation: Last Day Worked: Suspension: Last Day Worked: Position Eliminated (Severance Pay Yes No) Merit Increase Title Change Other
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Assignment/Rates Changes (Complete for New Hire)

Item	From	To	Item	From	To
Fund #			Salary/Wage (%)		
Status (FT, PT)			Number Hours/Week		
Exempt/Non-Exempt			Total \$ Fringe and Tax		

Signature Project Manager Research and Education: _____

Project Manager HR:

- Update Benefits Package
- Update Timesheet(s) and Give to Employee
- Accounting/Finance System Updated

Approvals

Principal Investigator	Date	Jane Cheung, Executive Director	Date
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