

Alfred University
PERSONNEL ACTION FORM

Note: NO OFFER/CHANGES MAY BE ANNOUNCED PRIOR TO THE FULL APPROVAL OF THIS FORM

Name of Candidate/Employee:		Effective Date of Action:	
Banner ID (if current employee):		Duration/End Date (if applicable):	
ACTION			
Appointments <i>Complete (B) below</i>	Changes <i>Complete (A) & (B) below</i>	Separations	Other Negotiated Benefits (must be pre-approved on RR)
<input type="checkbox"/> Appointment * <input type="checkbox"/> Rehire * <input type="checkbox"/> Extension of Temporary Appt ** <input type="checkbox"/> Overload** <input type="checkbox"/> Stipend ** <input type="checkbox"/> Extra Service **	<input type="checkbox"/> Promotion ** <input type="checkbox"/> Salary Change ** <input type="checkbox"/> Job Title ** <input type="checkbox"/> Department/Budget Code ** <input type="checkbox"/> Supervisor Change <input type="checkbox"/> Sabbatical/LOA	<input type="checkbox"/> Position Expiration <input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/> Termination **	<input type="checkbox"/> Moving Expenses Amount : <input type="checkbox"/> Housing Where : Amount : <input type="checkbox"/> Meals Amount :
Comments:			Amount :
*Recruitment requisition form must be approved prior to completion of this form. **Justification Required			
INFORMATION			
(A) Current		(B) Proposed	
Status: <input type="checkbox"/> FT or <input type="checkbox"/> PT <u>and</u> <input type="checkbox"/> Regular or <input type="checkbox"/> Temp		Status: <input type="checkbox"/> FT or <input type="checkbox"/> PT <u>and</u> <input type="checkbox"/> Regular or <input type="checkbox"/> Temp	
Title:		Title:	
Grade:	Salary/Rate:	Grade:	Salary/Rate:
Supervisor:	Time Sheet Org:	Supervisor:	Time Sheet Org:
FOAP 1: _____ %		FOAP 1: _____ %	
FOAP 2: _____ %		FOAP 2: _____ %	
FOAP 3: _____ %		FOAP 3: _____ %	
FUNDING SOURCE (s) ~ if salary & benefits exceed the funds available in the budget code listed above			
Source (FOAP):		Amount:	
REQUIRED SIGNATURES FOR APPROVAL			
* Signature not required if Recruitment Requisition Form was previously approved at same levels. Research payments require only Dean/Director and Research Acct sign off.			
Routing Order:	Print/Type Name	Signature	Date
Supervisor:			
Dean/Director:			
*Area Vice President/*Research Acct:			
Position Control:			
Human Resources Representative:			
*VP, Business & Finance:			
Please return this form with resume to Human Resources for preparation and distribution of offer letter to applicant/employee as per noted action. All benefit questions should be referred to the Office of Human Resources.			
Office Use Only: Copy Distribution <input type="checkbox"/> Supervisor <input type="checkbox"/> Dean/Director <input type="checkbox"/> VP/Research Acct <input type="checkbox"/> Payroll <input type="checkbox"/> VP B&F			Date: