

# PAF Example of PoE-Funded UCARE Student

Employee Name Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Personnel # \_\_\_\_\_ SSN # \_\_\_\_\_  
*(Personnel # required on all changes/separations) (SSN required for students and new hires only)*  
 Organizational Unit Name \_\_\_\_\_ Org. Unit Number \_\_\_\_\_

## Personnel Action Form

PAF Completed By \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_ Date \_\_\_\_\_

**PAY GRADE (Pay Scale Group)** \_\_\_\_\_ **JOB CLASS TITLE** **Student Worker**  
**EMPLOYEE SUBGROUP** **S2** **JOB CLASS CODE** **490 95500**

**EFFECTIVE DATES OF ACTION (MM/DD/YYYY):** From **07-01-20XX** To **06-30-20YY**

**SELECT AN ACTION** (enter X in as many boxes as applicable)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> New Hire                                      | <input type="checkbox"/> Rehire  | <input type="checkbox"/> Separation *                      |
| <input type="checkbox"/> Student Hire Credit Hrs _____ <i>required</i> | <input type="checkbox"/> Rehire as Volunteer                                 | <input type="checkbox"/> Separation with Pay or Benefits * |
| Hrs Worked _____ <i>required</i>                                       | <input type="checkbox"/> Rehire as Ancillary                                 | <input type="checkbox"/> Campus Transfer Out *             |
| <input type="checkbox"/> Ancillary Hire                                | <input type="checkbox"/> Funding Change <i>(for cost object change only)</i> | <input type="checkbox"/> LOA without Pay *                 |
| <input type="checkbox"/> Volunteer Hire                                | <input type="checkbox"/> Employment % - FTE Change *                         | <input type="checkbox"/> LOA with Pay *                    |
| <input type="checkbox"/> NonResAlien Hiring Addendum                   | <input type="checkbox"/> Salary/Rate Change *                                | <input type="checkbox"/> Return from LOA                   |
| <input type="checkbox"/> Campus Transfer In                            | <input type="checkbox"/> Organizational Change*                              | <b>* Requires a Reason Code</b>                            |

### ACTION (IT0000)

Reason Code \_\_\_\_\_ Position # \_\_\_\_\_ Employee Group - U.S. Citizen ?  Yes  No

### PERSONAL DATA (IT0002) *refer to Personal Data Form*

### ORGANIZATIONAL ASSIGNMENT (IT0001) *sets up employee relationship to entire University organization*

Benefits % (Contribution percentage toward benefits for contractual period):  
 \_\_\_\_\_ % for 12 months \_\_\_\_\_ % for 9 or 10 months **OR** Enter X if appropriate :  
 Ret/Ancil  Not Eligible

### ALL CURRENT POSITIONS AT THE UNIVERSITY

	Position Number	Staffing Percent
1		
2		
<b>TOTAL</b>		<b>=100%</b>

### ADDRESSES (IT0006) *refer to Personal Data Form*

### PLANNED WORKING TIME (IT0007) *sets up employee relationship to his/her current University contracts*

Work schedule rule:  Salary  M-F@ 8hrs/day  Other Days/Hours  Shift  Actual Time Reporting (Positive)

Hours scheduled per week (check one):  Full Time (40 hours)  Other **10** hours

Leave Plan Code: **OB** Contract Length Code: **08**

Comments: \_\_\_\_\_

### BASIC PAY (IT0008) *sets up employee relationship to payroll*

Wage Type **1001** Amt \$ **8.00**  hr  mo | Wage Type \_\_\_\_\_ Amt \$ \_\_\_\_\_  hr  mo  
 Wage Type \_\_\_\_\_ Amt \$ \_\_\_\_\_  hr  mo | Wage Type \_\_\_\_\_ Amt \$ \_\_\_\_\_  hr  mo

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Funding Dates		Cost Center or WBS Element	Position #	Wage Type	\$ Rate <i>hourly or monthly</i>	% of Cost Distribution
Begin	End					
07-01-20XX	06-30-20YY	(# provided in email)		1001	8.00	
Note: Percentage must equal 100% for any given period of time shown					TOTAL =	100%

**PAID APPOINTMENTS (IT9001) *overview of current paid positions for reporting purposes***

Appointment Start Date	Appointment End Date	Position #	Title Modifier	Budgeted Annual Salary	OR ↔	Total Amount To Be Paid	FTE % <i>relative to full time</i>
07-01-20XX	06-30-20YY					\$2000 or \$2400	.25

**UNPAID APPOINTMENTS (IT9001) *overview of current unpaid positions for reporting purposes***

Appointment Start Date	Appointment End Date	Title	Title Modifier	Organizational Unit Number

**BANK DETAILS (IT0009) / TAX AREA (IT0207): NE / TAX WITHHOLDING W4/W5 (IT0210)**

**ADDITIONAL PERSONAL DATA** *refer to Personal Data Form*

**RESIDENCE STATUS (I-9) (IT0094)**       C - Citizen     N - Non-citizen     A - Alien, non-resident

**DATE SPECIFICATIONS (IT0041) (MM/DD/YYYY)**

I-9 Date required \_\_\_\_\_ Last Working Date \_\_\_\_\_  
 First Working Date required \_\_\_\_\_ University Service Date \_\_\_\_\_  
 Tenure Date \_\_\_\_\_ Leave Accrual Date \_\_\_\_\_  
 Tenure Notify Date \_\_\_\_\_ Probation End Date \_\_\_\_\_

**EDUCATION & QUALIFICATIONS (IT0022/0024) *refer to Personal Data Form***

**ADDITIONAL COMMENTS OR EXCEPTIONS:**

UCARE student will be funded by PoE funds distributed by the Office of the Dean of Undergraduate Studies. Student can work up to 10 hours per week during the above funding period until the (\$2000 or \$2400) salary is reached.

**APPROVAL SIGNATURES**

\_\_\_\_\_ date \_\_\_\_\_      \_\_\_\_\_ date \_\_\_\_\_  
 \_\_\_\_\_ date \_\_\_\_\_      \_\_\_\_\_ date \_\_\_\_\_

**Attachments**

- Form W-4 (required for all new/returning employees) / Form W-5 (Earned Income Credit - optional)
- Form I-9 with photocopies of documentation (required for all new/returning employees)
- Direct Deposit agreement form or notarized Employee Election Not To Participate in Direct Deposit (*current form required*)
- Personal Data Form (PDF)
- Correspondence and supportive documentation