PER 101 14 1

SELECT ONE:

(1)

(3)

(5)

FACULTY**
EXEMPT

NONEXEMPT

EMPLOYMENT AND CHANGE OF STATUS

OTHER

DATE

(Last Name)	(First Na	(Middle Initial)				
Colleague ID #	(Address)		(Area Code/Telephone No.)			
(Job Title /Grade/Step/Rank) 1. Employed at the rate of \$	per	aÁDepartment) on an	•	ition No.) (Colleag	ue Budget No.)	
basis for (full-time/half-time/ten	(hr/mo.) start date nporary/part-time)	e (first day of emplo	(hourly; 9, 10, or 12 months) end date* nployment)			
*If part-time or temporary, indicate approximate time position will be needed.						
Name of person replaced	Salar	y of person replaced	\$ (Amount)	(Budget No)	(Position No.)	
2. Transferred from	(Department or Office)	(Job Title/Grade/Step/Rank)				
(D. ::: N.)	(5. 1. 1.1.)	effective		, <u> </u>		
(Position No.)	(Budget No.)			(Date)		
3. Terminated, last working day				(Indicate reason	in Section 7)	
4. Changed in title from	(Present Title/Grade/Step/Ra	(New Title/Grade/Step/Rank)				
5. Changed in rate of pay from \$	to \$	per eff	fective (Indicate reason in Section 7)			
6. Granted leave-of-absence\ leave without pay from through			(Indicate reason in Section 7)			
6a. Employee has been granted FMLA leave through (Indicate reason in Section 7) 7. Reason(s): Attach additional sheet if necessary.						
APPROVAL AND ACTION						
		(2)				
Dept. Chairperson or Supervisor	Date	Divisiona	al Dean (if applicabl	e)	Date	
		(4)				
Provost/VP of Instruction & Student Servi	ces (if applicable) Date	(4) #7\	Vice President of \		Date	
Human Resources	Date	(6) <u>President</u>	:		Date	