

Personnel Action Form

A. COMPLETE FOR <u>ALL</u> APPOINTMENTS:

Type of Action:	Date		
□ New Appointment □ Change to Existing Appointment	UF ID		
Employee Name	Position Number (if known)		
Department	Position Title		
Position Type:	DPS Student □OPS Non-Student □Graduate Assistant		
OPS Faculty Faculty 9 Month	Faculty 12 Month		
Total Salary : \$ per	Assignment Dates		
□ Hour □ Annual □ Term of appointment	From To (end date if non-continuing)		
Permanent Term/Temp	Pay Grade (if known)		
Supervisor Name/Reports To	FTE		

B. COMPLETE FOR REQUESTED CHANGES TO EXISTING APPOINTMENTS: (check all that apply)

Change Salary Amount From	То	
□ Change Title From	То	
Change FTE From	То	
Supplemental Pay Amount \$	Other (ex. Terminate)	
(Describe Type of Supp)		

C. COMPLETE FOR RESEARCH ASSISTANTS (max allowed 20 hours weekly for all appointments)

Fall or Spring RA Appointment at \$8.05/Hr (Max 15 Weeks Per Term)			Summer RA Appointment at \$8.05/Hr (Max 7 Weeks Per Term)				
Choose One:	Max Hrs Per Week	Max Hrs Per Term	Max Charge to PDA (Includes Fringe)	Choose One:	Max Hrs Per Week	Max Hrs Per Term	Max Charge to PDA (Includes Fringe)
	20	300.0	\$2,453.64		20	140.0	\$1,145.03
	10	150.0	\$1,226.82		10	70.0	\$572.52
	7.5	112.5	\$920.12		7.5	52.5	\$429.39
	5	75.0	\$613.41		5	35.0	\$286.26
	2.5	37.5	\$306.71		2.5	17.5	\$143.13
Approva	of Student	Time (Choos	e One):				
	Option 1	Faculty Appointer to approve time in MyUFL					
	Option 2	Student to provide printed timesheet with faculty signature to Faculty Support					
	Option 3	Student time approval is delegated to Faculty Support					

D. APPROVAL SIGNATURES (obtain in order listed below)

Date
Date
Date

For Business Office Use Only				
Payroll Distribution				
Chartfield/HR Code:				
ePAF Entered By/Date:				
I-9 By/Date:				
Distribution Posted				
By/Date: [Emp. Rec. #]				
Email Notification:				
Database Entry:				