BOWIE STATE UNIVERSITY Office of Human Resources Personnel Action Form

SECTION I – Identifying Information				
PIN	Departme			Date
Employee Name				
<u>Check all that apply</u> - Sta	atus: Regular		Faculty	
	Conting	ent I / II	Exempt Staff	
			Non-Exempt Staff	
SECTION II – Change Information				
Reason for change:				
Salary Adjustment	Promotion	Retention	Acting Salary Increase	Transfer (10 day notice)
Equity	Title Change	PIN Conversion	Demotion	Completion of Probation
Market	Reclassification	Release Time	Bonus Amount	
Shaded area for HR completion.				
All Salary actions requir	e documentation.			
Effective Date of Chang				
Yearly Salary Change	From:		To:	
Department	From:		To:	
Position Title	From:		To:	
Range/Grade	From:		То:	
Category	From:		То:	
Dept ID/Account Code	From:		To:	
SECTION III – New Hire Information (This section is completed by the Office of Human Resources)				
Position Title Union Exclusion:	Mgr Supv	Confidential	Starting Salary	
Title Code		Range/Grade_		Effective Date
Department ID		Account Code		Percentage
Department ID		Account Code		Percentage
Orientation Date		Supervisor Name		_ Campus Ext
SECTION IV – Authorized Signatures (2 Days Per Signature)				
1.Dept Head/Chairperson	& Dean	Date 5	. Budget Office	Date
2.Area Vice president		Date 6	.Vice President of Administr	ration & Finance Date
$\overline{3.\text{Grants Accounting (if a)}}$	pplicable)	Date 7	'.President	Date
4.Grants Compliance (if a	applicable)	Date 8	B.Human Resources	Date
HR - Personnel Action Form Revised 10/08				

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Instructions

This form should be used for all personnel actions indicated on the front of the form.

The following instructions should be used when completing the form:

SECTION I Identifying Information

• This section requires employee identification and the current department

SECTION II Change Information

- Check the reason(s) for change.
- Indicate all changes from the current status to the new status for approval. Indicate no change if the information remains the same.
- Grant funded positions will require a Personnel Action Form when the project ID changes at the beginning of the grant year.

SECTION III New Hire Information (this section is completed by the Office of Human Resources)

• Human Resources will confirm and complete the new hire information based on the hiring manager's recommendation, approved budgeted amount and the new hire's acceptance.

SECTION IV Authorized Signatures

- All signatories are numbered in the order of operation/flow.
- Each receiving office will date stamp the PAF, authorize within 2 days, and forward to the next office in a sealed envelope (stamped confidential).
- If the process flow is interrupted, the holder of the PAF must contact the initiator (Signatory #1) for status and or resolution.



Completed by

Supervisor

Day 1-15 Each Signatory will date stamp the PAF upon receipt and forward to the next office

within 2 days.

HR