



# New Hire and Changes

## Personnel Action Form – Students Only

Name (Last,First) \_\_\_\_\_ Date Effective \_\_\_\_\_

Student Employee # \_\_\_\_\_ Student Class Year \_\_\_\_\_

**NEW HIRE**

Position Title \_\_\_\_\_

Rate of Pay \_\_\_\_\_ per hour

G.L. Account Number (ex -310-xxxxxx-xxxx) \_\_\_\_\_ Or Job Code if Known: \_\_\_\_\_

New Employee     
  Rehire in Dept.     
  Additional Pay

Federal Work Study Yes     
  No

Department Contact \_\_\_\_\_

Supervisor / Faculty \_\_\_\_\_

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**STATUS CHANGE**

Wage Change     
  Account Change

Other \_\_\_\_\_

	PRESENT	PROPOSED
Position Title		
Rate of Pay		
Account Number		
Job Code (if known)		
Supervisor		

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**INACTIVATE JOB**

Account Number \_\_\_\_\_ Or Job Code if Known: \_\_\_\_\_

Position Ended     
  Discharge     
  Graduated

Voluntary Quit     
  Other \_\_\_\_\_

Comments \_\_\_\_\_

Supervisor Approval \_\_\_\_\_ Date \_\_\_\_\_

**FOR BUSINESS AFFAIRS/PAYROLL OFFICE USE ONLY:**

Revised Job Code: From \_\_\_\_\_ to \_\_\_\_\_

Approved By: \_\_\_\_\_ Date \_\_\_\_\_