

<b>EMPLOYEE</b>	<b>Name:</b> _____	<b>Social Security No.:</b> _____
	<b>Home Address:</b> _____	<b>Home Phone:</b> _____
	<b>Office Location:</b> Bldg _____ Room No. _____	<b>Office Phone:</b> _____
		<b>ULM Email:</b> _____

<b>ACTION</b>	<b>Action:</b> _____	<b>Effective Date:</b> _____	<b>Ending Date:</b> _____
	<input type="checkbox"/> New Appointment <input type="checkbox"/> Reappointment <input type="checkbox"/> Salary Change	<b>Salary Rate:</b> _____	<b>Salary Rate Period:</b> _____
	<input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/> Termination		(12 mo, 9 mo, fall only, etc.)
	<input type="checkbox"/> Other (specify) _____		
	<b>Position Title:</b> _____	<b>ULS Approval No:</b> _____	
	<b>Full/Part-Time:</b> _____ <b>Percent of Time:</b> _____ <b>Years Experience:</b> _____	<b>ULM:</b> _____	<b>TOTAL:</b> _____
<b>New or Vacant Position:</b> _____	<b>Previous Incumbent:</b> _____		

<b>EDUCATION</b>	<b>Highest Degree Earned:</b> _____ <b>Date:</b> _____	<b>Terminal Degree? (yes or no)</b> _____
	<b>Degree Discipline:</b> _____	Month/Year _____ <b>Degree CIP Code:</b> _____
	<b>Hrs Over Masters:</b> _____	
	<b>Institution of Highest Degree:</b> _____	
	<b>Institution Location:</b> _____	

<b>FACULTY</b>	<b>Tenure Status:</b> _____	<b>Tenure Review Date:</b> _____	<b>Date Tenured:</b> _____
	<b>Tenure Discipline:</b> _____		<b>Tenure CIP Code:</b> _____
	<b>Teaching Discipline:</b> _____		<b>Teaching CIP Code:</b> _____
	<b>Academic Rank:</b> _____		<b>Rank Date:</b> _____

<b>BUDGET / PAYROLL</b>	<b>Assigned Department:</b> _____	<b>Payroll Budget Code(s):</b> _____
		(Specify amount or percentage for each)
	<b>Assigned Department Budget Code:</b> _____	
	<b>Does this position earn compensatory time? (yes or no)</b> _____	<b>Budget Page/Line:</b> _____
	<b>Requesting Agent:</b> _____	<b>Approving Agent:</b> _____
	(Please type or print name)	(Please type or print name)
	Signature _____ Date _____	Signature _____ Date _____
	Signature _____ Date _____	Signature _____ Date _____

REMARKS	

ROUTING	PAYROLL USE ONLY
From: Requesting Agent to Approving Agent to Vice President	Entered By: _____
From: Vice President to Budget Office to Human Resources to Payroll	Date: _____
FOR HUMAN RESOURCES USE ONLY	
<input type="checkbox"/> FLSA: Exempt <input type="checkbox"/> FLSA: Non-Exempt	EEO Function: _____
	EEO Occupation: _____
	F02: _____
	Class Code: _____