PERSONNEL ACTION FORM FOR ADMINISTRATIVE POSITIONS (Exempt)

Name:		**Banner G#:**	
Address:			**Zip Code:**
Payroll Account Number(s)			
1)		**%**	
2)		**%**	
3)		**%**	
4)		**%**	
Department:		**Person Replaced:**	
Effective Date:			
Title:			
Full-time____	**Part-time____**	**FTE ____**	**Temporary____**
Months to work per year ____		**Annual Salary:**	
Special Circumstances or Conditions:			

MANAGER/CHAIRPERSON **DATE**

VICE PRESIDENT **DATE**

VP FOR ADMINISTRATION & FINANCE **DATE**

INSTRUCTIONS:

- **Please ensure that all portions of the form are completed since this is the source document for the employment letter.**
- **Please indicate any special instructions or conditions that apply.**
- **Return to Human Resources for processing.**