

# UMD ACADEMIC PERSONNEL ACTION WORKSHEET

For VCAA Use Only:  
HRMS \_\_\_\_\_

New Hire Benefits Eligible       P&A    Faculty    Graduate/Professional

Name: \_\_\_\_\_  
(legal name as it appears on social security card)

Employee ID: \_\_\_\_\_  
Position No.: \_\_\_\_\_

<u>Record No.</u>	<u>Effective Date</u>	<u>Action</u>	<u>Reason</u>	<u>DeptID</u>	<u>Job Code</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Leave of Absence: \_\_\_\_\_ % of time       With Pay  
Begin date: \_\_\_\_\_      End date: \_\_\_\_\_       Without Pay

Company      Employee Class (choose one)       Regular (> 3 mo)       Full Time (40 hrs)  
 UMN       Academic Prof (93xx, 96xx, 97xx, selected 95xx)       Temporary (< 3 mo)       Part Time (< 40 hrs)  
 UNS       Faculty (94xx)      \_\_\_\_\_  
 Grad/Prof (selected 95xx)      Weekly Standard Hours      FTE (use 2 decimals)  
 Medical Resident (selected 95xx)      \_\_\_\_\_  
 Student Insurance (selected 95xx)      \_\_\_\_\_  
 No Benefit (i.e., hourly, summer, lump sum)      \_\_\_\_\_

Pay Group      Employee Type/Frequency      Semester Type:      Biweekly Comp Rate      ABBR  
 Pay       Hourly/Hourly      Fall       \_\_\_\_\_      \_\_\_\_\_  
 Without Salary       Exception Hourly/Hourly      Spring       \_\_\_\_\_      \_\_\_\_\_  
 Salaried/Biweekly      \_\_\_\_\_

Appointment Type      Appointment Term      Faculty Union Code      UEA Conversion      Hire Type:  New or  Replacement  
 \_\_\_\_\_      \_\_\_\_\_       I1/JDN Not eligible      **Contact Hours** \_\_\_\_\_      Replacement ID: \_\_\_\_\_  
 I2/JDE UEA eligible      **Conversion %** \_\_\_\_\_      Hire Requisition No. \_\_\_\_\_  
 One time emergency hire exemption

Dates of F/J appt type: \_\_\_\_\_

<u>Distribution Dates</u>	<u>Combo Code</u>	<u>Earnings Code</u>	<u>Hours/Amount (per pay period)</u>	<u>Percent</u>	<u>Encumbrance (R or N)</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Pay Entry: \_\_\_\_\_

Comments:

  
  
  
  
  
  
  
  
  
  

Prepared by: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized by: \_\_\_\_\_ Date: \_\_\_\_\_