

PERSONNEL ACTION REQUEST

Department: _____ **Contact:** _____

REQUEST FOR: New Position Hire/Recruitment Hire/Recruitment Visiting Reclassify Position
 Special Pay Increase/Stipend **Check all options that apply**

POSITION TYPE: Faculty Administration Staff **POSITION NUMBER:** _____

CURRENT TITLE: _____ **EMPLOYEE NAME:** _____

FUNDING SOURCE: E&G Auxiliary/Fees Foundation Grant Other

FUND: **DEPT:** **PROD:** **INIT:** **PROJECT:**

For multiple funding sources, select all that apply and provide breakdown in the details field below

Requested Salary/Range: \$ _____ **Increase/Decrease:** \$ _____

Provide details about the request. Indicate needs for facilities, start-up funds, etc. and how they will be addressed.

Attach completed *Academic Affairs Faculty Request Form* for all requests with faculty positions

_____ Dean/Director		_____ Date		_____ Vice Chancellor		_____ Date
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_____ Human Resources	_____ Administration & Finance	_____ Chancellor	_____ Date
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