

THE UNIVERSITY OF VERMONT
PERSONNEL ACTION CHANGE FORM

EMPLUÿÒÒ NAME (Læç Fä•dÿ ää ˆD		ÁÁÁÁÁ() [^^^ÁD:	
POSITION #:	POSITION TITLE:	EMPL REC #:	UNION CODE:
DEPARTMENT NAME and #:		EMPL CLASS:	

TABLE A: Check the Action Reason(s) and note effective date(s) below.				TABLE B: Sep. Reasons/ Vacation			
X	ACTION REASON:	EFF. DATE:	ADDITIONAL INSTRUCTIONS:	SEPARATION REASON:			
	GAP START		For part-time "U2" represented lecturers only.	<input type="checkbox"/>	Chronic Absenteeism	<input type="checkbox"/>	Misconduct
	GAP END (Return to Active Status)		For part-time "U2" represented lecturers only.	<input type="checkbox"/>	Death	<input type="checkbox"/>	Mutual Consent
	JOB DATA CHANGE/ UPDATE	Indicate in Table C.	Indicate changes/ updates below in Table C.	<input type="checkbox"/>	Elimination of Position	<input type="checkbox"/>	Personal Reasons
	JOB TRANSFER		Attach a Set-Up Position Form for new job.	<input type="checkbox"/>	End of Fixed Term Contract	<input type="checkbox"/>	Relocation
	PROMOTION	Indicate in Table C.	Indicate current and new titles in Table C.	<input type="checkbox"/>	Grad Assignment Completed	<input type="checkbox"/>	Resignation
	LEAVE OF ABSENCE With Benefits Without Benefits	Indicate in Table C.	Indicate changes in 'Leave' field/s in Table C. Attach a LOA Form if beginning a leave.	<input type="checkbox"/>	Gross Misconduct	<input type="checkbox"/>	Resignation-Other Position
	RECLASSIFICATION	Indicate in Table C.	Indicate Position Title, Job Code and Salary/Pay Rate changes below in Table C.	<input type="checkbox"/>	Health Reasons	<input type="checkbox"/>	Retirement
	RETIREMENT		Indicate vacation hours in Table B, note if 'O'	<input type="checkbox"/>	Inability to Perform Essential Functions	<input type="checkbox"/>	Return to School
	SABBATICAL	Indicate in Table C.	Indicate 100% or 77.3% FTE and salary in the 'Sabbatical' field in Table C.	<input type="checkbox"/>	Job Dissatisfaction	<input type="checkbox"/>	Staff Reduction
	SEPARATION/ TERMINATION		Select reason at right. Indicate vacation hours in Table B, note if 'O'	Vacation Hours Owed: Please note if 'O' Hrs: _____ OR 'O' (Zero)			
	OTHER		Indicate details in 'Comments' section below.				

TABLE C: Indicate the update(s) and change(s) below. Please refer to the 'Job Data' tabs in PeopleSoft for current information.							
X	CHANGE:	CURRENT:		REVISED:		EFF. DATE	
	ASSIGNMENT FTE						
	ASSIGN. TERM (4, 5, 9, 10, 11, 12 mths)						
	BUSINESS UNIT & BUS UNIT #						
	DEPARTMENT & DEPT # (of employee)						
	EXEMPT/ NON-EXEMPT						
	JOB INDICATOR (Primary, Secondary)						
	LEAVE OF ABSENCE START						
	LEAVE OF ABSENCE RETURN						
	POSITION #						
	REPORTS TO & THEIR POSITION #						
	SALARY/ PAY RATE						
	SABBATICAL START	FTE	\$	FTE	\$		
	SABBATICAL RETURN	FTE	\$	FTE	\$		
	SHIFT						
	TENURE STATUS						
	TITLE & JOB CODE						
	UNION CODE						
	WORKING TITLE						
	OTHER (please specify in Comments below)						

TABLE D: For changes to the Position Allowance Model (P.A.M.) funding components, please email a completed Position Change Order (PCO) form to: fabadmin@uvm.edu (The PCO is available at <http://www.uvm.edu/~ofabweb/?Page=pmrecruit1.html>)

REQUIRED- SELECT ONE: ___ No P.A.M. Changes ___ P.A.M. Changes; Updated PCO Emailed ___ N/A

COMMENTS:

FORM PREPARED BY	DATE	SUPERVISOR	DATE	DEAN/ APPROPRIATE ADMINISTRATOR	DATE
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