



# Personnel Action Form

Human Resources  
3640 Colonel Glenn Hwy.  
Dayton, OH 45435-0001  
(937) 775-2120

\_\_\_\_\_  
Name (Last, First, MI)

\_\_\_\_\_  
Social Security Number/UID Number

\_\_\_\_\_  
NBAPOSN

\_\_\_\_\_  
Job Start Date

\_\_\_\_\_  
Job Stop Date

\_\_\_\_\_  
Organization Name

\_\_\_\_\_  
Affirmative Action Number

\_\_\_\_\_  
Campus Address/Campus Phone Number

\_\_\_\_\_  
City Work Loc. (other than main campus)

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Position Class Number/Salary Band

\_\_\_\_\_  
Position FTE

\$ \_\_\_\_\_  
Annual Base Salary

\$ \_\_\_\_\_  
Base Monthly/Hourly Rate

\$ \_\_\_\_\_  
Monthly Stipend Rate (If Applicable)

Employment Type	Contract Type	Employment Status
<input type="checkbox"/> Faculty	<input type="checkbox"/> Continuing Employment	<input type="checkbox"/> Superseding Appointment
<input type="checkbox"/> Fiscal (12 month)	<input type="checkbox"/> Special Contract	<input type="checkbox"/> New Hire / Re-hire
<input type="checkbox"/> Academic (9 month)	<input type="checkbox"/> Temporary	<input type="checkbox"/> Leave <input type="checkbox"/> with pay
<input type="checkbox"/> Tenure Track	<input type="checkbox"/> 30-Day Emergency	<input type="checkbox"/> without pay
<input type="checkbox"/> Non-Tenure Track	<input type="checkbox"/> Interim Appointment (6 month)	<input type="checkbox"/> returning from leave
<input type="checkbox"/> Unclassified	<input type="checkbox"/> Visiting Scholar / Faculty	<input type="checkbox"/> Termination / Separation
<input type="checkbox"/> Unclassified Hourly	<input type="checkbox"/> Visiting NTT	<input type="checkbox"/> Retirement
<input type="checkbox"/> Classified	<input type="checkbox"/> Limited NTT	<input type="checkbox"/> Promotion
<input type="checkbox"/> Certified	<input type="checkbox"/> Auxiliary	<input type="checkbox"/> Demotion
<input type="checkbox"/> Provisional	<input type="checkbox"/> One-Time Payment (bonus/award)	<input type="checkbox"/> Job Assignment Change
<input type="checkbox"/> Classified PTOC	<input type="checkbox"/> Gross	<input type="checkbox"/> Transfer
<input type="checkbox"/> Retiree	<input type="checkbox"/> Net	<input type="checkbox"/> Other Data Change
<input type="checkbox"/> Bargaining Unit		<input type="checkbox"/> Renewal

Salary Distribution	Distribution 1	Distribution 2	Distribution 3	Distribution 4	Distribution 5	Distribution 6
Index						
Fund						
Org						
Acct						
Program						
Activity						
Funding Source						
Academic salary (3 qtrs)	\$	\$	\$	\$	\$	\$
Academic stipend (3 qtrs)	\$	\$	\$	\$	\$	\$
Fiscal year salary	\$	\$	\$	\$	\$	\$
Fiscal year stipend	\$	\$	\$	\$	\$	\$
Special contract salary	\$	\$	\$	\$	\$	\$
Percent of Salary						<b>100%</b>

**Comments/Conditions:**

**Reallocation**

Action Code _____ ECLS _____ Earn Code _____ Cert. Date _____	Dept./College Approval/Date _____ Budget/RSP Approval/Date _____ HR Approval/ Date _____ Payroll Approval/Date _____
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\*SHADED AREAS FOR HR USE ONLY.