



## EER-Employee Action to Change / Transfer / Hire / Reappoint Information Sheet

Type of Request:    Change      Transfer      New Hire      Reappoint  
 Hiring Department: \_\_\_\_\_ Funding Department: \_\_\_\_\_  
 Originator: \_\_\_\_\_ Date Created: \_\_\_\_\_ Desk Extension: \_\_\_\_\_  
 New Hire/ Employee Name: \_\_\_\_\_ T-number \_\_\_\_\_  
 Position Title \_\_\_\_\_ Position Number: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Reports To (T#/Name/Position No): \_\_\_\_\_  
 Current Salary: \_\_\_\_\_ New Salary: \_\_\_\_\_ Hrs./Wk.: \_\_\_\_\_ FTE: \_\_\_\_\_  
 Exempt: \_\_\_\_\_ Non-Exempt: \_\_\_\_\_ Hourly Rate: \_\_\_\_\_  
 Job Effective Date: \_\_\_\_\_ Job End Date: \_\_\_\_\_  
 Web Supervisor: \_\_\_\_\_ T-Number: \_\_\_\_\_ Position Number: \_\_\_\_\_  
 Funding Type:    \_\_\_ State    \_\_\_ Local    \_\_\_ Grant    \_\_\_ Title III

ACTION	FUND	ORGANIZATION	ACCOUNT	PROGRAM	ACTIVITY	FTE
Current						
Other						
Other						

Comments: \_\_\_\_\_  
 \_\_\_\_\_

**APPROVALS:**

Dean/Director/Department Chair Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
 VP Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
 Provost/EVP Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
 Budget/Grants/Title III Signature Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
 Human Resources Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**HR USE ONLY**

Job Reason Code: \_\_\_\_\_ Other (LNG, HAZP, Shift Diff, BRP): \_\_\_\_\_ ECL: \_\_\_\_\_  
 FZMTINS/TINS: \_\_\_\_\_ Transaction #: \_\_\_\_\_ Payroll ID: \_\_\_\_\_  
 Entered By: \_\_\_\_\_ Date: \_\_\_\_\_