



PERSONNEL ACTION FORM (PAF)
Hire temporary instructor, staff, or student
Additional pay for current benefited employee

New PAF

Revised PAF

Section 1: EMPLOYEE DATA

1. Employee ID (If previously worked at UMass – this is <u>not</u> their Social Security Number)		
2. Employee Name		
3. Address		
4. City	5. State	6. Zip Code
7. Personal Email	8. Home Phone	9. Mobile Phone

INFORMATION FOR HIRING AND APPROVING:

- New Employees must complete new hire paperwork including I-9, Personal Data, Tax Forms, and the “Terms of Employment”.
- Student appointments are considered null and void if the students are no longer enrolled full-time at the University.
- When funding from an export restricted project, the Project Director /PI certifies that the employee, if required by grant or contract restrictions, has been cleared by the Compliance Office.
- Staff hires with a commitment amount of \$5000 or more must be approved by a Vice Chancellor.

Section 2: JOB DATA

10. Employee Type - Select One Checkbox

<p>10a. HIRE TEMPORARY STAFF (Non-Student/Non-Benefited)</p> <p><input type="checkbox"/> Hourly Staff If Hourly Staff, also Provide Working Title: <input type="text"/></p> <p><input type="checkbox"/> Salaried Staff</p>	<p>10b. HIRE STUDENT (Non-Benefited; Not for TA/RA/GA)</p> <p><input type="checkbox"/> Hourly Student Employee</p> <p><input type="checkbox"/> Salaried Student Employee</p>	<p>10c. HIRE TEACHING & INSTRUCTION (All Salaried)</p> <p><input type="checkbox"/> Adjunct Faculty <input type="checkbox"/> Retired Faculty <input type="checkbox"/> Clinical/Practicum Supervisor <input type="checkbox"/> Instructional Lessons</p> <p><u>CHECK BOX(ES) BELOW IF APPLICABLE</u></p> <p><input type="checkbox"/> Senior Adjunct Faculty <input type="checkbox"/> Earned Terminal Degree</p>	<p>10d. ADDITIONAL PAY (Current benefited employees ONLY)</p> <p><input type="checkbox"/> ACE - Continuing Studies <input type="checkbox"/> ACF - Faculty <input type="checkbox"/> ACP - Professional <input type="checkbox"/> CHR - Chair Stipend <input type="checkbox"/> DCS - Academic Coordinator Stipend <input type="checkbox"/> ASR - Director/Dean Stipend <input type="checkbox"/> SA1 – Summer Teaching</p>
---	---	---	---

11. Appointment Begin Date	12. Appointment End Date	13. Department Name	14. Location (Room and Building)
15. Manager or Supervisor's Name	16. Standard Hours per Week	17. Mail Drop	18. Combo Code (if more than one use box 22) L
19. Compensation Frequency (check one) <input type="checkbox"/> Hourly (complete boxes 20 and 21) <input type="checkbox"/> Salaried (complete box 21 ONLY)	20. Hourly Rate for Hourly Staff/Students ONLY \$	21. Commitment Amount (Total Compensation for contract) \$	

22. Additional Appointment Terms or Information (i.e. course numbers, reason for additional pay, split funding including all combo codes and percentage breakdown, etc.):

Section 3: AUTHORIZATIONS / APPROVALS

Form Initiator _____ Phone Extension _____ Date _____	Dean/Director _____ Date _____
Department Chair/Manager or Principal Investigator _____ Date _____	Provost/Vice Chancellor _____ Date _____

Section 4: OFFICE USE ONLY

Date HR Received: _____	Date Payroll Received: _____	Number of Pay Periods: _____
PAYROLL DATA ENTRY	By (Initials): _____ Date: _____	Biweekly Rate: \$ _____
New Hire Contracts	All Contracts	If Applicable
I-9 Received: <u>Yes</u> or <u>No</u> FTE: _____ Retirement: _____ Mail Drop: _____ Commitment Accounting: _____		Total Retro Amount: \$ _____