



The Foundation for California State University, San Bernardino

EMPLOYMENT AND EMPLOYEE CHANGES PERSONNEL TRANSACTION REPORT

EMPLOYEE NAME: _____

EFFECTIVE DATE: ____/____/____ (Review Transaction Effective Date Instructions on Back)

EMPLOYMENT ACTIONS: () New Hire () Rehire () Reappointment () Change

CHANGE ACTIONS: () Pay Increase () Leave of Absence () Return from Leave () Acct # Change () Add Acct # () Delete Acct # () Re-classification () Transfer () Other

STATUS: () Staff () CSUSB Student () CSUSB Faculty () CSUSB Staff () Emergency Appointment

DEPARTMENT: () Sponsored Program () Bookstore () Business Office () General Fund () Food Service () Infant/Toddler Center () Children's Center

Program Name: _____ Department Director's Name: _____ Budget Period: From: _____ To: _____

ACCOUNT# (6 DIGITS) FUND# (5 DIGITS) DEPARTMENT# (5 DIGITS) PROJECT # (7 DIGITS)

Table with columns: JOB TITLE, RATE OF PAY (Current Pay Rate, New Rate (Proposed Increase)), # OF HOURS/ WEEK

EMPLOYEE CLASSIFICATION

() Staff Exempt With Benefits () MPP w/HR Approval Only () Full-time () Without Benefits () With Benefits () One Time Appointment Separation Date Without Benefits () Temporary/ On Call Without Benefits () Part-time () Without Benefits () With Benefits () Emergency Appointment # of Days Without Benefits

LEAVE OF ABSENCE From _____ To _____ Reason: _____

COMMENTS: _____

Authorized Signer for the account _____ Date _____

Supervisor _____ Date _____

Sponsored Programs Budget Approval _____ Date _____

Foundation Use Only: HR _____ Date _____ Appt Letter _____ Date _____ Emergency Appt End Date _____ WC Code _____ FRM #405.5 06/06 Distribution: White -HR Yellow-PR Pink-Employee Gold-Department

INSTRUCTIONS FOR EMPLOYMENT AND EMPLOYEE CHANGES PERSONNEL TRANSACTION REPORTS

NAME: Enter employee's name (first, middle initial, last name).

TRANSACTION EFFECTIVE DATE: Enter for
New Hires - first day employee is scheduled to work.
Rehires - first day employee returned to work.
Reappointment – first day of new budget period.
Pay Increase – date increase is to begin.
Leave of Absence - last day the employee physically worked.
Return from Leave - first day the employee is back to work.
Account # Change/Add/Delete, list date change is to occur.
Re-Class or Transfer – list date action is to occur.
Other – list date and explain in comments section.

EMPLOYMENT ACTIONS: *New Hire* = new employee for your department, *Rehire* = former employee of your department that will begin working for you again, *Reappointment* = Department is maintaining employee into new budget period, *Change* = must complete the Change Actions section.

CHANGE ACTIONS: Check all that are applicable.

STATUS: Check only one. Only CSUSB Students can have student status. Students from any post-secondary academic institutions other than CSUSB are not considered students and must be marked as staff.

DEPARTMENT: Check only one department.
Print Program Name and the Department/Program Director's Name.
If you are under a Sponsored Program or the Children's Center you must enter the annual budget period.

ACCOUNT # / FUND# / DEPARTMENT # / PROJECT #: MUST Print all four numbers. 23 digits total.

JOB TITLE: Print employee's working job title.

RATE OF PAY: List employee's monthly, hourly or daily pay rate. If the change is a pay increase, also list the new proposed rate of pay.

If the program is a Federal Grant/Contract the hourly rate for CSUSB Staff and Faculty must be equal to or less than their current CSUSB rate of pay.

OF HOURS PER WEEK: List the number of hours per week that the employee is scheduled to work.

EMPLOYEE CLASSIFICATION: Check only one. The Director of Human Resources must approve an MPP Classification. A One Time Appointment requires a separation date within the same pay period as the effective date. **If employee is CSUSB faculty or CSUSB Staff, classification must be Part-time without benefits.**

LEAVE OF ABSENCE: List the "from" and "to" dates, and the reason for the leave of absence. **ATTACH THE APPROVED LEAVE OF ABSENCE FORM.**

COMMENTS: Use this space to inform the HR Office of special instructions or information.

SIGNATURES: The following signatures are needed: Authorized Signer for the Account, Supervisor of the Authorized Signer and for sponsored programs and or children's center, the Sponsored Programs Administrator authorizing budget approval for the action.