

Date: _____

PRF# Authorizing Position: _____

UNCLASSIFIED PERSONNEL DOCUMENT

New Hires/Changes in Appointment

Minnesota State University, Mankato
Human Resources

PERSON INFORMATION

Name Last	First	MI	Tech ID	Position Title (Include "Working Title" ex: Chairperson)	Budget Position No	Supervisor/Dean (Tech ID & Name)

Barg Unit	Faculty Rank	Other Agency Complete if currently employed at another state agency.
<input type="checkbox"/> 220 Excluded <input type="checkbox"/> 211 MSUAASF <input type="checkbox"/> 209 IFO <input type="checkbox"/> Adjunct	<input type="checkbox"/> Professor <input type="checkbox"/> Associate Prof <input type="checkbox"/> Assistant Prof <input type="checkbox"/> Instructor	Agency Name: _____

NOTE: IF A CURRENT EMPLOYEE'S ON-CAMPUS ADDRESS/PHONE HAS CHANGED YOU MUST SUBMIT AN ON-CAMPUS INFORMATION CHANGE FORM (available at mnsu.edu/humanres)

Department (If split between 2 departments please list both)	College/School	Central Administration Division
1.	1.	1.
2.	2.	2.

APPOINTMENT INFORMATION

Action	Status	Begin Date	End Date	Decision Date	Base Salary
<input type="checkbox"/> New Employee <input type="checkbox"/> Summer Session <input type="checkbox"/> Previous Employee <input type="checkbox"/> Overload	<input type="checkbox"/> (1) Tenure <input type="checkbox"/> (8) Adjunct				
<input type="checkbox"/> Funding Change: Old Acc# _____ New Acc# _____	<input type="checkbox"/> (2) Probationary <input type="checkbox"/> (9) At will				
<input type="checkbox"/> Increase/Decrease Salary: From \$ _____ To \$ _____	<input type="checkbox"/> (3) Fixed Term <input type="checkbox"/> (D) 2-Yr Fixed Term	Does this position supervise others? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Other: Please explain: _____	<input type="checkbox"/> (4) Permanent Status <input type="checkbox"/> (E) Externally Funded	If YES, please list the previous incumbent: (if applicable) _____			
	<input type="checkbox"/> (7) Non-Tenure Track <input type="checkbox"/> (F) 4-Year Fixed Term				

Separation	Does this position supervise others? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Non-Renewal <input type="checkbox"/> Dismissal <input type="checkbox"/> Retirement	Last Date Worked: _____ If YES, please list the replacing supervisor: _____
<input type="checkbox"/> Resignation <input type="checkbox"/> Deceased <input type="checkbox"/> Other	

ASSIGNMENT INFORMATION

Workload Assignment	Primary Assn.	HR Only			% Time	Duty Days	Credits	Teaching	ITV	Grad Only	Acct # (Cost Center)	% to Acct	Summer	Fall	Spring	Contract Dollars
		Assn Type	Begin Date	End Date												
	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

REVIEWED & APPROVED

I certify that this personnel action complies with MnSCU Board Policy 4.10 and 4.10.1: Nepotism. Available at www.mnsu.edu/humanres/policy/nepotism.pdf

Dean _____ Date _____

President or Vice President _____ Date _____

Department Chair/Director/Supervisor _____ Date _____

Human Resources _____ Date _____

COMMENTS

Total: _____

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

HR USE ONLY

S4 Position #: _____ Job Code: _____ Range: _____ Step: _____ Emp. Cond: _____ Emp. Status: _____ Seq#: _____