Prepared by:					
Effective after Salary Sheet Submission (June/July)					
VPAA	BENF				
PRSL	PAYL				
Sent to Payroll					

BOWLING GREEN STATE UNIVERSITY

FACULTY PERSONNEL ACTION FORM (PAF)

Name:		BGSU Empl ID	#:	Position #:	
Dept/School:		Rank/Title:		Addendum Date:	
HR Dept. # [HCM>Job Data>Work Loc	cation Tab]:		Emp	oloyee Class:	
Department Number or Project ID #:		Fund: Account:			
	demic Year al Year	Fall Semester Spring Semester	Other (specify)		
Effective Date of Appointment (mm/dd/					
CHECK ALL THAT APPLY A	ND DESCRIBE:				
Change in account number of the change in salary Change in title Change in assignment	bers	Change in effective d Resignation/Retireme			
Overload:	Course		Credi	t Hours/FTE:	
		Is course s	Total Ove I and obtain signature of VPA scheduled during work hours? see indicate below how time w	Ye	
DESCRIPTION OF CHANGES:		n yes piea	ise indicate below now time w	m be made up.	
% Full-Time:					
% Full-Time:					
Description/Comments:					
	One Tim	e Payment			
Signature, Hiring Department Head		Date	Signature, Division Appoin	ting Authority	Date
			Signature, VPAA (for conse	cutive overload)	Date