



Exceed Expectations

**PERSONNEL ACTION FORM – PART TIME**

RECOMMENDED ACTION: \_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_ EMPLOYEE IS A STUDENT? (YES OR NO): \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ MILITARY SERVICE (if yes, list dates): \_\_\_\_\_ EMP ID: \_\_\_\_\_

1. EDUCATION (MOST RECENT FIRST). THIS SECTION NOT REQUIRED FOR STUDENT EMPLOYEES			
DEGREE/ CERTIFICATION	DISCIPLINE	YEAR ATTAINED	COLLEGE ATTENDED

2. EMPLOYMENT HISTORY (MOST RECENT JOB FIRST) THIS SECTION NOT REQUIRED FOR STUDENT EMPLOYEES			
POSITION TITLE	START DATE	END DATE	EMPLOYER

POSITION TITLE: \_\_\_\_\_ SALARY: \$ \_\_\_\_\_ per hour

BUDGET ACCOUNT NUMBER: \_\_\_\_\_ MAXIMUM # OF HOURS PER WEEK: \_\_\_\_\_ FUNDS REQUIRED: \$ \_\_\_\_\_

GRANT NAME: \_\_\_\_\_ DATE GRANT EXPIRES: \_\_\_\_\_

DEPARTMENT/ DIVISION: \_\_\_\_\_ AREA: \_\_\_\_\_

EMPLOYEE CURRENTLY EMPLOYED AT ECC? *SELECT ONE*: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

4. APPROVALS		
1. DIRECTOR/ CHAIRPERSON (TYPE NAME)	SIGNATURE	DATE
2. AREA HEAD (TYPE NAME)	SIGNATURE	DATE
3. BUDGET <b>BUDGET</b>	SIGNATURE	DATE
4. HR <b>HUMAN RESOURCES</b>	SIGNATURE	DATE
5. PRESIDENT <b>PRESIDENT</b>	SIGNATURE	DATE

**POSITION #:** \_\_\_\_\_ **ECLS:** \_\_\_\_\_ **BANNER ACTION CODE:** \_\_\_\_\_