



STUDENT EMPLOYMENT TRANSACTION REQUEST FORM

DEPT NAME: _____ College: _____ Division: _____

SPVR. NAME: _____ Dept Contact Name: _____

EMPLOYEE NAME: _____ ID#: _____

SECTION 1- REAPPOINTMENT (To be used only if you are reappointing employee(s) who are currently working or worked the last academic term in your dept.)

Select Appointment Type: Student Assistant (1870) Bridge Student Assistant (1874) Switch from Work Study to Student Assistant Proposed Effective Date: _____	Notes, if any: _____ _____ _____ _____
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Funding Source (1): _____	BUDGET USE ONLY	CMS# _____	Initials: _____
Funding Source (2): _____		CMS# _____	Initials: _____
Funding Source (3): _____		CMS# _____	Initials: _____

SECTION 2- PAY RATE CHANGE (To be used only if you are requesting a pay increase)

Pay increases will be effective on the first day of the following pay period from the date the request is received in Human Resources.

Select Increase Type:

Service Pay Increase _____ *Justification: (attach additional documents if needed)

Job Progression Increase (Justification required*) _____

Equity Increase _____

Current Hourly Rate: _____

Requested Rate: _____

HR Assigned Effective Date: _____

Payroll Verified Hrs.: _____ **As of:** _____ **Initials:** _____

SECTION 3- EMPLOYMENT SEPARATION -Only an MPP or Dept. Chair may terminate employment for cause and **must** contact Human Resources prior to notifying the employee of their termination. The employee **must** receive their final paycheck at the time of termination.

Voluntary resignation Exhausted Federal Work Study Funds Not enrolled in required units Graduated	Temporary assignment completed Performance Other: Last Day Worked: _____	Checklist: <input checked="" type="checkbox"/> Attach a paper timesheet for all hours worked in current pay period. <input checked="" type="checkbox"/> Attach resignation letter (if applicable). HR Term Date: _____
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SECTION 4- APPROVAL SIGNATURES REQUIRED

MPP/DEPT CHAIR

Name: _____ Signature: _____ Date: _____

HR USE ONLY

Key Date: _____ Initials: _____ Record # 271- - -	Notes: _____ _____
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Multiple Student Assistant Reappointments

Student Name (Last, First)*	Student ID*	New Student Classification*	MPP Supervisor Name* <small>(Do not insert non-MPP time keeper name here.)</small>	Funding Source/Chartfield string* <small>(If multiple funding sources, include all chart strings, with applicable percentages noted.)</small>	(Budget Analyst/Position Control Use Only) Position Number:	(HR Use Only) PIMS Date
1						271-
2						
3						
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HR Notes:

HR Signature:



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