

# Personnel Event Form

Human Resource Services



<b>Banner ID</b> M	<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE</b>	<b>PREFIX</b>	<b>SUFFIX</b>
Department contact name		Department contact no.	Department box no.		
Department contact e-mail		Department Name	Division		

**JOB AND PAY INFORMATION**

<b>NBAJOBS</b>	<b>Action:</b>					
	<b>PAYROLL DATES</b>		<b>Position</b>	<b>Suffix</b>	<b>Monthly Salary</b>	<b>Annual Salary</b>
	<b>Begin</b>	<b>End</b>				
	<b>LABOR DISTRIBUTION: (Informational only—Contact Budget Office for changes)</b>					
	<b>Index #</b>	<b>Amt/Pct</b>	<b>Index #</b>	<b>Amt/Pct</b>	<b>Index #</b>	<b>Amt/Pct</b>

**PEAEEMPL EMPLOYEE INFORMATION**

<b>PEAEEMPL</b>	<b>EMPLOYEE INFORMATION</b>		
	Last Day Worked:	Termination Date (last date paid):	Termination Reason:

**PPAGENL DEGREE INFORMATION: Enter for each degree earned (if required)**

<b>PPAGENL</b>	SBGI Code:	SBGI Code:	SBGI Code:
	Institution Name:	Institution Name:	Institution Name:
	Degree:	Degree:	Degree:
	Major:	Major:	Major:

**EXPERIENCE INFORMATION VPAA:** Other Higher ED: Related Exp.: CIP CODE: AA USE ONLY

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Remarks

**AUTHORIZATION**

Department Head _____	Date _____	President _____	Date _____
PI _____	Date _____	Graduate Dean _____	Date _____
Dean _____	Date _____	Institutional Equity and Compliance _____	Date _____
Vice President _____	Date _____	Human Resource Services _____	Date _____