



# PERSONNEL ACTION FORM

1. Date \_\_\_\_\_

2. Name \_\_\_\_\_

3. Social Security No. \_\_\_\_\_

4. Current Address \_\_\_\_\_

5. Permanent Address \_\_\_\_\_

T Number \_\_\_\_\_

|               |        |         |  |                 |                 |                           |                        |                                      |
|---------------|--------|---------|--|-----------------|-----------------|---------------------------|------------------------|--------------------------------------|
| 6. Birth Date | 7. Sex | 8. Race | 9. A. Handicap <input type="checkbox"/> Yes <input type="checkbox"/> No<br>B. Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No | 10. Citizenship | 11. Visa Status | 12. Yrs. of Relevant Exp. | 13. Yrs. TTU Work Exp. | 14. Yrs. Other Higher Ed. Experience |
|---------------|--------|---------|--|-----------------|-----------------|---------------------------|------------------------|--------------------------------------|

|                    |  |                                   |   |
|--------------------|--|-----------------------------------|---|
| 15. Highest Degree | 16. When and Where Received Highest Degree | 17. Major Field of Highest Degree | 18. Special Degrees, Professional Licenses Certificates, etc. |
|--------------------|--|-----------------------------------|---|

19. Effective Date \_\_\_\_\_

20. A. Expiration Date of Appointment (if applicable) \_\_\_\_\_  
 B. Last Day Worked on Previous Appointment \_\_\_\_\_

21.  New Appointment  Reappointment

A. Type of Appointment (Check one.)

- Academic (check one in each column).
 

|   |   |
|---|---|
| a. <input type="checkbox"/> Specific Term Appt. | a. <input type="checkbox"/> Tenured                 |
| b. <input type="checkbox"/> Continuous Appt.    | b. <input type="checkbox"/> Tenure-track            |
| c. <input type="checkbox"/> Special Appt.       | c. <input type="checkbox"/> Not eligible for tenure |
- Administrative/Professional
- Clerical/Supporting a. Skill Level \_\_\_\_\_
- Graduate Student:  Masters  Ed.S.  Ph.D.
 

|  |  |
|--|--|
| a. <input type="checkbox"/> Teaching Assistant | c. <input type="checkbox"/> Support Assistant  |
| b. <input type="checkbox"/> Teaching Associate | d. <input type="checkbox"/> Research Assistant |
- Student Employment or Award. (Explain in #32 type account name, account number, amount by term, and billing code, if applicable)

B. Status (Check one in each column)

|                                       |   |
|---------------------------------------|---|
| a. <input type="checkbox"/> Permanent | a. <input type="checkbox"/> Full-time             |
| b. <input type="checkbox"/> Temporary | b. <input type="checkbox"/> Part-time % FTE _____ |

C. Term Appointed (Check one)

|  |   |
|--|---|
| a. <input type="checkbox"/> Academic Yr. | c. <input type="checkbox"/> Summer      |
| b. <input type="checkbox"/> Fiscal Yr.   | d. <input type="checkbox"/> Other _____ |

22.  Separation (Check one. Explain in #32(Explain in # 32)

|                |  |
|----------------|--|
| a. Resignation | c. <input type="checkbox"/> Retirement |
| b. Termination |  |

23.  Change (Check type(s). Explain in #32)

|   |  |
|---|--|
| a. <input type="checkbox"/> Salary or Hourly Rate | g. <input type="checkbox"/> Promotion        |
| b. <input type="checkbox"/> Title                 | h. <input type="checkbox"/> Tenure           |
| c. <input type="checkbox"/> Acct. No(s)           | i. <input type="checkbox"/> FTE%             |
| d. <input type="checkbox"/> Status                | j. <input type="checkbox"/> Leave of Absence |
| e. <input type="checkbox"/> Transfer              | k. <input type="checkbox"/> Other _____      |
| f. <input type="checkbox"/> Suspension            |  |

(Explain in # 32)

24. Presently Employed by the State of Tennessee  
 Yes  No

25. Proficient in Oral English  
 Yes  No

26. Valid I-9  
 Yes  No  Unknown

| 27. Index Code<br>(List rest of FOAPA below.) | Position Number | Percent Employed | Annual Salary | Monthly Salary | or | Hourly Rate | Total Budgeted Amount This Position | Budgeted Amount Projected For This Appointment |
|---|-----------------|------------------|---------------|----------------|----|-------------|-------------------------------------|--|
| 1.  |                 |                  |               |                |    |             |                                     |  |
| 2.  |                 |                  |               |                |    |             |                                     |  |
| 3.  |                 |                  |               |                |    |             |                                     |  |
| <b>TOTALS</b>                                 |                 |                  |               |                |    |             |                                     |  |

|                         |                |                                 |  |
|-------------------------|----------------|---------------------------------|--|
| 28. College or Division | 29. Department | 30. Position Title/Faculty Rank | 31. Maintenance Allowance<br>Fees <input type="checkbox"/> Yes <input type="checkbox"/> No Meals <input type="checkbox"/> Yes <input type="checkbox"/> No Housing <input type="checkbox"/> Yes <input type="checkbox"/> No |
|-------------------------|----------------|---------------------------------|--|

| FOAPAL | COAS Code | Fund Code | Org Code | Account Code | Program Code | Activity Code |
|--------|-----------|-----------|----------|--------------|--------------|---------------|
| 1.     | _____     | _____     | _____    | _____        | _____        | _____         |
| 2.     | _____     | _____     | _____    | _____        | _____        | _____         |
| 3.     | _____     | _____     | _____    | _____        | _____        | _____         |

32. Remarks \_\_\_\_\_

|  |      |  |      |
|--|------|--|------|
| 33. Department Chairperson or Director | Date | 34. Dean or Administrative Officer                   | Date |
| 35. Dean of Graduate School            | Date | 36. Personnel and Payroll Officer                    | Date |
| 37. Vice President (Academic Affairs)  | Date | 38. Affirmative Action Officer/Financial Aid Officer | Date |
| 39. President                          | Date | 40. Employee's Signature (if applicable)             | Date |

### FOR PAYROLL AND PERSONNEL USE ONLY

|          |     |             |                |             |             |       |         |             |            |
|----------|-----|-------------|----------------|-------------|-------------|-------|---------|-------------|------------|
| Job Code | TKL | Start Event | New Assignment | Salary Rate | 12 Mo. Rate | Defer | Payback | Retire Code | Title Code |
|----------|-----|-------------|----------------|-------------|-------------|-------|---------|-------------|------------|

I accept this position under the conditions outlined herein which may include work related to instruction, administration, research and other sponsored programs.