

STUDENT PERSONNEL ACTION FORM

FOR DEPARTMENT/DIVISION USE:

Student Name: _____ Student ID Number _____
Hiring Department: _____ Dept. Number: _____
Employment Dates: Begin _____ End _____

Action:	Position:
<input type="checkbox"/> Vacant Position Replacing (student's name)	
Reason: <input type="checkbox"/> Change from _____	to _____
Rate of Pay: _____	Time Approver: _____
_____	_____
Equivalency: _____	

MAXIMUM NUMBER OF WORK HOURS NOT TO EXCEED 19 HRS PER WEEK

Current Budget Mgr: _____

FEDERAL WORK STUDY ONLY - FOR FINANCIAL AID:

This student is: Eligible NOT Eligible

Authorized by Financial Aid: _____

By signing above, you are authorizing Human Resources to charge this student to the Federal Work Study account.

STUDENT ASSISTANT ONLY - FOR BUDGET USE:

Funds for this position are: Available NOT Available

Position Number: _____

Signature: _____

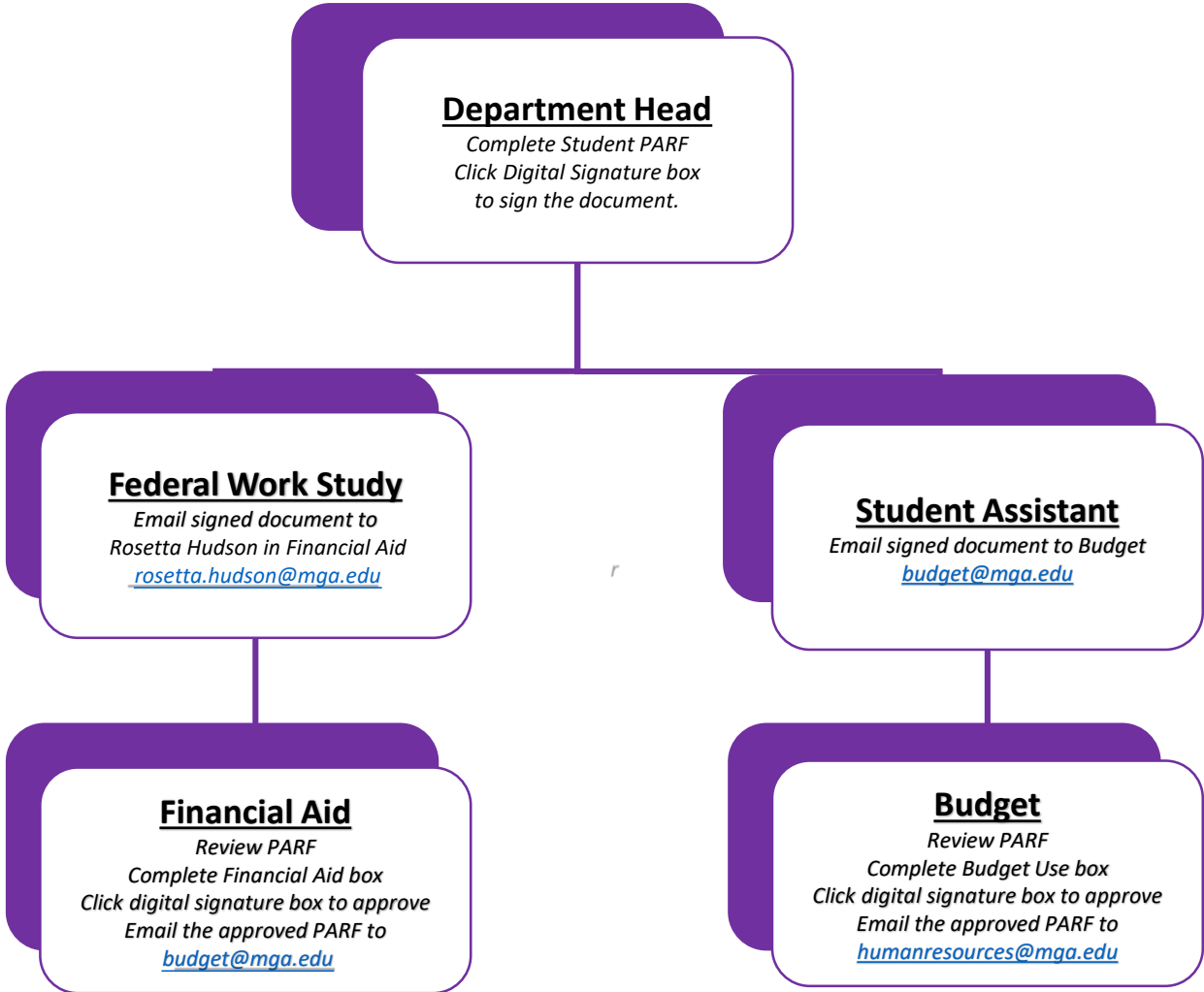
HUMAN RESOURCES ONLY

Background started " _____ Background Cleared _____ Enter into OneUSG _____ Entered By: _____

Student Personnel Action Request Form

Instructions

Please complete all data required on the student PARF.



Incomplete PARFs will be returned to the initiator. If changes are required after approvals has been obtained, the original PARF should be edit and submit to Initiator, Financial and Budget to ensure all appropriate channels. This will ensure that each approver is aware of any changes being made.