EMPLOYEE PERSONNEL REPORT

UNIVERSITY OF GEORGIA

DOCUMENT NO.	PAGE	DATE	FY	DEPARTMENT PHONE	COLLEGE OR DIVISION
	01		12		

DEPARTMENT / PROJECT	PRI DEPT	HIGH DEGREE	INSTITUTION	YEAR

SOC. SEC. NUM.	LAST NAME	FIRST NAME/INITIAL	MIDDLE INITIAL/NAME	SUF

STREET OR ROUTE NO. (LINE 1)	NON-WORK	BIRTH DATE	SPOUSE'S NAME	CHAIR

STREET OR ROUTE NO. (LINE 2)	UNIVERSITY	CITIZEN OF	I-9	VISA	COUN-

CITY	STATE	ZIP + 4	UNIVERSITY BUILDING NAME	BLDG. NO/FLOOR/ROOM

UGA EMPLOYMENT HISTORY
☑ (C) CURRENT ☐ (P) PREVIOUS
DATE ___ ___ ___

PAY TYPE M

ACTION MO DA YR 02 25 12

UGA % TIME 100 000

☑ (1) REGULAR ☐ (2) UGA STUDENT ☐ (3) TEMPORARY ☐ (4) NR-ALIEN
☑ (E) EXEMPT ☐ (N) NON-EXEMPT ☐ (T) TIPPED
☐ (M) MALE ☑ (F) FEMALE
☐ (S) SINGLE ☐ (M) MARRIED ☐ (Y) FACULTY RANK ___ ☐ (N) NON-FACULTY
☐ (1) WHITE ☑ (2) BLACK ☐ (3) ORIENTAL/ASIAN ☐ (4) AMERICAN INDIAN ☐ (5) HISPANIC ☐ (6) MULTIRACIAL ☐ (9) ___

FOR PAYROLL DEPT USE ONLY

FED EXM	STATE EXM

OASDI ___ RETIRE ___ GDCP ___
H I ___ EIC ___ ___ ___ COUNTY MONEY (PER PAY PERIOD) ___

COOP. EXT. EMPLOYEES
UGA SALARY ___
COUNTY MONEY ___
TOTAL ___

PAYROLL PAYMENT DISTRIBUTION
☑ (1) SEND TO DEPT (DIST CODE) 806
☐ (2) DIRECT DEPOSIT (SEND PR105 TO PAYROLL)
☐ (3) PICK UP AT PAYROLL WINDOW

TRX	HOME DEPT	SHORT TITLE	POSN NO.	APPT. BEGIN MO DA YR HR	APPT. END MO DA YR HR	JOBCLASS CODE	POSITION TITLE	POS % TIME	C N	FULL TIME ANNUAL SALARY	S C	SUPPLEMENT AMOUNT
	806	CLRMN	47A	07 01 11 00	06 30 12 80	10391	PROGRAM SPECIALIST II	1 00000	N	32.395		

PAYROLL AUTHORIZATION

	HOME DEPT	SHORT TITLE	POSN NO.	ACCOUNT	FISCAL YEAR EFT	FISCAL YEAR BUDGET
	806	CLRMN	47A	1046GT806000	91800	29728
				TOTALS	91800	29728

	MO DA YR HR	MO DA YR HR	MO DA YR HR	MO DA YR HR	MO DA YR HR
FROM	07 01 11 00	02 01 12 00	03 01 12 00	04 01 12 00	
THRU	01 31 12 80	02 29 12 80	03 31 12 80	06 30 12 80	
AMOUNT PER PAY PERIOD	2699 58	2241 59	490 83	2699 58	
OR HOURLY RATE					
	2699 58	2241 59	490 83	2699 58	

☐ (A) NEW UGA EMPLOYEE ☐ (B) LATERAL TRANSFER ☐ (C) PROMOTION
☐ (D) REPLACEMENT POSITION - NAME OF LAST INCUMBENT ___
☐ (E) APPOINTMENT TO NEW POSITION
☐ (F) CHANGE % TIME EMPLOYED FROM ___ TO ___
☐ (G) CONTINUATION WITHIN EXISTING BUD-
☐ (H) REVISE DISTRIBUTION OF SALARY
☐ (I) TRANSFER FROM DEPT ___ TO ___
☐ (J) CHANGE PAY TYPE FROM ___ TO ___

☐ (K) CHANGE TITLE FROM ___ TO ___
☐ (L) CHANGE NAME FROM ___ TO ___
☐ (M) CHANGE SSN FROM ___ TO ___
☑ (N) LEAVE W/O PAY 2/24/11@4.5 HRS TO 03/26/11 @8 HRS
☐ (O) CHG COUNTY $ ___ TO ___
☐ (P) TERMINATION - REASON ___ TO ___
☐ (Q) OTHER (SPECIFY) ___

REMARKS

Monthly personnel with Leave without pay (Employee worked 3.5 hours on 2/24)

Monthly LWOP needs to be reflected in the month the leave without pay occurs

February, 2002
http://www.busfin.uga.edu/forms/

DOCUMENT NO.	PAGE	DATE	FY	DEPARTMENT/PROJECT
	1		12	

SOC.SEC.NUM.	LAST NAME	FIRST NAME/INITIAL	MIDDLE NAME/INIT.	SUF

UNIVERSITY OF GEORGIA BUDGET AMENDMENT

BUDGET POSITION

HOME DEPT	POSN NO.	APPT. BEGIN MO	APPT. BEGIN DA	APPT. BEGIN YR	APPT. BEGIN HR	APPT. END MO	APPT. END DA	APPT. END YR	APPT. END HR	JOB CLASS CODE	POSITION TITLE	POS % TIME	C N	FULL TIME ANNUAL SALARY	S C	SUPPLEMENT AMOUNT
806 CLRMN	47A	07	01	11	00	06	30	12	80	10391	PROGRAM SPECIALIST II	1 00000	N	32,395		

BUDGET AMENDMENT (PERSONAL AND NON-PERSONAL SERVICES)

HOME DEPT	POSN NO.	ACCOUNT	OBJECT	DESCRIPTION	CURRENT EFT	CURRENT BUDGET	CHANGE EFT	+ -	CHANGE AMT	REVISED EFT	REVISED BUDGET
806 CLRMN	47A	1046GT806000	51110		1 00000	32395	08200	-	2667 -	91800	29728
806 LBCLR	L A	1046GT806000	51130		2 61100	61600	10400	-	2667 +	2 50700	64267
TOTALS					3 61100	93995	17900	-		3 42500	93995

FUNDING SOURCE (DEPARTMENTAL INCOME OR CONTINGENCY)

ACCOUNT	OBJECT	FUNDING SOURCE	CHANGE AMT	+ -
		TOTAL		

REMARKS / REFERENCE

Monthly personnel with Leave without pay (Employee worked 3.5 hours on 2/24)

APPROVAL	DATE	APPROVAL	DATE	DEPT HEAD	DATE	V. PRESEIDENT	DATE	CONTRACTS &	DATE
APPROVAL	DATE	UNIT/PROJECT	DATE	DEAN/DIRECTOR	DATE	BUDGET REVIEW	DATE	BUDGET OFFICE	DATE

MONTHLY - LWOP