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 10 01 11

UGA % TIME 50 000

☑ (1) REGULAR ☐ (3) TEMPORARY
☐ (2) UGA STUDENT ☐ (4) NR-ALIEN

☑ (E) EXEMPT ☐ (N) NON-EXEMPT ☐ (T) TIPPED

☐ (M) MALE ☑ (S) SINGLE ☐ (Y) FACULTY RANK ___
☑ (F) FEMALE ☐ (M) MARRIED ☑ (N) NON-FACULTY

☑ (1) WHITE ☐ (3) ORIENTAL/ASIAN ☐ (5) HISPANIC
☐ (2) BLACK ☐ (4) AMERICAN INDIAN ☐ (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	04A	07 01 11 00	09 30 11 80	10233	IT ASSOCIATE DIRECTOR	1	00000	N	50.000		
	806	CLRMN	04B	10 01 11 00	06 30 12 80	10233	IT ASSOCIATE DIRECTOR	0	500000	N	50.000		

PAYROLL AUTHORIZATION

	HOME DEPT	SHORT TITLE	POSN NO.	ACCOUNT	FISCAL YEAR EFT	FISCAL YEAR BI[illegible]ET
	806	CLRMN	04A	1021RX806300	0 25000	12500
	806	CLRMN	04B	1021RX806300	0 37500	18750
				TOTALS	0 62500	31250

	MO DA YR	MO DA YR	MO DA YR HR	MO DA YR HR	MO DA YR HR
FROM	07 01 11 00	10 01 11 00			
THRU	09 30 11 80	06 30 12 80			
AMOUNT PER PAY PERIOD	4166 67	2083 33			
OR HOURLY RATE					
	4166 67	2083 33			

☐ (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 100% TO 50%
☐ (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 ___ TO ___
☐ (O) CHG COUNTY $ ___ TO ___
☐ (P) TERMINATION - REASON ___ TO ___
☐ (Q) OTHER (SPECIFY) ___

REMARKS

% CHANGE FOR MONTHLY PERSONNEL

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	DA	YR	HR	APPT. END MO	DA	YR	HR	JOB CLASS CODE	POSITION TITLE	POS % TIME		C N	FULL TIME ANNUAL SALARY	S C	SUPPLEMENT AMOUNT
806	CLRMN	04A	07	01	11	00	09	30	11	80	10233	IT ASSOCIATE DIRECTOR	1	00000	N	50,000		
806	CLRMN	04B	10	01	11	00	06	30	12	80	10233	IT ASSOCIATE DIRECTOR	0	500000	N	50,000		

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	04A	1021RX806300	51110		1	00000	50000	75000	-	37500	-	25000		12500
806	CLRMN	04B	1021RX806300	51110					37500	+	18750	+	37500		18750
			1021RX806300	91000				24000			18750	+			42750
TOTALS						1	00000	74000	37500	-			62500		74000

FUNDING SOURCE (DEPARTMENTAL INCOME OR CONTINGENCY)

ACCOUNT	OBJECT	FUNDING SOURCE	CHANGE AMT	+ -
		TOTAL		

REMARKS / REFERENCE

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

% CHANGE FOR MONTHLY PERSONNEL