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 ___|___|___

[✓] (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) ___

PAY TYPE	UGA % TIME	ACTION MO DA YR
S	75 | 000	07 01 11

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) ___
[ ] (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
	800	CLRTC	01A	07 01 11 00	07 01 11 00	00150	PROOF READER	75000	N	21.000		
	800	ALCLR	L A	07 01 11 00	07 12 11 20		ACCRUED LEAVE	1 00000	N	21.000		

PAYROLL AUTHORIZATION

	HOME DEPT	SHORT TITLE	POSN NO.	ACCOUNT	FISCAL YEAR EFT	FISCAL YEAR BUDGET
	800	CLRTC	01A	1011GH806000		
	800	ALCLR	L A	1011GH800000		583
				TOTALS		583

	MO DA YR HR	MO DA YR HR	DA YR HR	MO DA YR HR	MO DA YR HR
FROM	07 01 11 00	07 01 11 00			
THRU	07 01 11 00	07 12 11 20			
AMOUNT PER PAY PERIOD OR HOURLY RATE		10 057			

[ ] (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 ___ TO ___
[ ] (O) CHG COUNTY $ ___ TO ___
[✓] (P) TERMINATION - REASON LAST DAY 6/30/2011 TO ___
[ ] (Q) OTHER (SPECIFY) ___

REMARKS

LAST DAY WORKED 6/30/2011 WITH 58 HRS ACCRUED LEAVE PD @100% ON PPE 7/06/2011

Salary Accrued Leave paid out of Lump Sum Position

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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
										00150		75000	N	21,000		
												1 00000	N	21,000		

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
800 ALCLR	L A	1011GH800000	51120			5500			583	+		6083
		1011GH800000	71000			88900			583	-		88317
TOTALS						94400						94400

FUNDING SOURCE (DEPARTMENTAL INCOME OR CONTINGENCY)

ACCOUNT	OBJECT	FUNDING SOURCE	CHANGE AMT	+ -
1011GH800000	50000		583	-
1011GH800000	70000		583	+
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

June 2001
http://www.busfin.uga.edu/forms/

Salary Accrued Leave paid out of Lump Sum Position