

**Employment Transaction Report (ETR)**  
Employment & Employee Changes

All changes in employee status must be completed in every case where there is an employee change in job classification, salary rate, job status or termination. **This form must be received by UAS Human Resources PRIOR to the effective date.** If you have any questions regarding this form, please contact Human Resources.

Section I- EMPLOYEE INFORMATION		
Employee ID:	Requisition ID:	
Last Name:	First Name:	Middle Initial:
Address:	City:	Zip Code:
Phone Number:	Email:	<input type="checkbox"/> Current UAS Employee
Emergency Contact:	Phone Number:	<input type="checkbox"/> CSLA Faculty/Staff

All employees are required to meet federally mandated I-9 work eligibility and authorization procedures. All employees therefore must present acceptable work authorization documents in person to Human Resources-UAS **no later than their first day of work as a new hire or rehire.**

Section II- EMPLOYMENT ACTION AND CLASSIFICATION		
<b>Effective Date:</b>	<b>Action Type:</b>	
	<input type="checkbox"/> Pay Rate Change <input type="checkbox"/> New Position <input type="checkbox"/> New Hire <input type="checkbox"/> Rehire <input type="checkbox"/> Termination	<input type="checkbox"/> Position Change <input type="checkbox"/> Project ID <input type="checkbox"/> Additional Project <input type="checkbox"/> Replacement <input type="checkbox"/> Time Base Change <input type="checkbox"/> Transfer <input type="checkbox"/> Salary Range From: _____ To: _____

<b>Employee Classification (select only one):</b>	<b>FLSA:</b>
<input type="checkbox"/> Full-time (30+ hrs/wk) <input type="checkbox"/> Part-time (< 29 hrs/wk) <input type="checkbox"/> Temporary	<input type="checkbox"/> Exempt (Salary) <input type="checkbox"/> Non-Exempt (Hourly)
<input type="checkbox"/> Student (20/hrs wk) <input type="checkbox"/> Internship <input type="checkbox"/> Prenamed	

Section III- JOB INFORMATION				
<b>Rate Change Reason</b> (if app):	<b>**Pay Rate:</b> <small>** (HR must approve)</small>	<b>% Rate Diff</b> <small>current vs. proposed new rate</small>	<b>**Proposed New Rate</b> (if app)	<b>Hours/Week</b>
<input type="checkbox"/> Merit (attach evaluation) <input type="checkbox"/> Promotion <small>(HR must approve)</small> <input type="checkbox"/> Other _____	Bi-weekly _____ (Salary) Hourly: _____		Bi-weekly _____ (Salary) <small>** (HR must approve ALL pay rates)</small> Hourly: _____	

<b>Job Title:</b>		<b>Work Location:</b>		<b>This position:</b>		<b>Yes</b>	<b>No</b>
<input type="checkbox"/> Promotion-HR approval Req <input type="checkbox"/> Reclassification <input type="checkbox"/> Other (Specify) _____		<input type="checkbox"/> On-campus <input type="checkbox"/> Off-campus Location: _____		1. Works with minors, elderly, or disabled persons 2. Has cash handling duties/access to level 1 data 3. Will drive on UAS related business 4. Works in a lab with access to chemicals		<input type="checkbox"/>	<input type="checkbox"/>

<b>Live Scan Charges Account#:</b>	Interviewer:	Position Supervisor:
	Ext.:	Title:

Section IV- DEPARTMENT	
<b>Dept/Project Name:</b>	<b>Director/PI:</b> (please print) _____
	Email: _____ Phone: _____
<b>Budget Period:</b>	<b>Resource Mgr.:</b> (please print) _____
From: _____ To: _____	Email: _____ Phone: _____

Chart of Accounts - Provide the account the position will be charged to					
	Fund	Organization	Account	Project ID	Program
Current Status					
New Status					

Section V- REASON FOR SEPARATION		
<b>Effective Date:</b>	<input type="checkbox"/> Professional Development <input type="checkbox"/> Better Job <input type="checkbox"/> Better Pay <input type="checkbox"/> Personal Reasons	<input type="checkbox"/> Dissatisfaction with Job <input type="checkbox"/> End Temporary Appt. <input type="checkbox"/> Graduated Other: _____
	<b>Eligible for Rehire? Yes <input type="checkbox"/> No <input type="checkbox"/></b>	
	<b>Requires HR Approval:</b> <input type="checkbox"/> Job Abandonment <input type="checkbox"/> Layoff <input type="checkbox"/> Dismissal <input type="checkbox"/> Fail Rtn from Leave <input type="checkbox"/> Separation	

**Section VI- AUTHORIZATION SIGNATURES**

**TRANSACTION IS NOT OFFICIAL WITHOUT ALL REQUIRED SIGNATURES AND FINAL HR APPROVAL**

Employee	Date	Human Resources	Date
Initiating Supervisor	Date	Executive Director	Date
Dean/Director/Resource Manager	Date	Pay Class	WC Code
UAS/ Contracts & Grants	Date	Class Code	International Student <input type="checkbox"/>
		Department to retain own copy	FICA Exempt <input type="checkbox"/>