



Request to Move A Civil Service or Union-Represented Staff Appointed Employee into a P&A Appointment

Route this form to:
Your OHR Consultant and
then Compensation
U Wide Form: UM 1753
Rev: March 2010

Individual for Whom Change is Requested

Name:		Current:		Proposed:	
Employee ID		Job Code		Job Code	
Department ID		Title		Title	
College/Admin Unit		Appointment Type		Appointment Type	
		Appointment Term		Appointment Term	
		Percent Time		Percent Time	
		Annual Full-Time Base Salary		Annual Full-Time Base Salary	

Supporting Materials to Attach

The following documents are to be included with the request:

- Statement of rationale for change in appointment. Please include the following information:
 - Why is this change being requested?
 - How is this change in appointment consistent with the department's workforce planning?
 - How do the functions, skills, and education of the employee support the move to a P&A appointment?
 - Comment on whether or not there are other individuals who may also be misclassified or who might apply for the academic position if it were subject to search procedures.
- Current departmental organization chart
- Proposed departmental organization chart
- EEO Statement regarding whether or not this shift into a P&A appointment will make a positive contribution to affirmative action obligations within the unit's group of P&A appointments and whether or not it contributes to the elimination of a P&A affirmative action goal.
- Curriculum vitae or resume of employee, including education and employment history and agreement to move if approved
- Current position description (include a description of what the individual was hired to do originally and a history of what has occurred since that time)
- Proposed position description including percent time of duties

Requested:

Requested: Responsible Administrator/Supervisor	Date:
Requested: Department Head	Date:
Requested: Campus, College or Administrative Unit Head	Date:

Approved:

Approved: Office of Human Resources Consultant	Date:
Approved: Office of Human Resources Compensation	Date:

Agreed To:

Agreement with Change: Employee	Date:
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