Roger Williams University and Roger Williams University School of Law

Faculty Personnel Action Form

FACULTY NAME: _____ **EFFECTIVE DATE OF ACTION:** _____/_____/_____

EMPLOYEE ID: _____ **DEPARTMENT:** _____ **SCHOOL:** _____

LOCATION: ☐ Bristol ☐ School of Law ☐ Providence Metro Center

PLEASE CHECK ALL THAT APPLY:

☐ Separation (Voluntary) ☐ Separation (Involuntary) ☐ Separation (Retirement) ☐ Additional Position
☐ Department/GL Change ☐ Change in Rank/Tenure Status (Promotion)
☐ Sabbatical/Leave of Absence (from: _____/_____/_____ to: _____/_____/_____)

PLEASE CHECK ALL THAT APPLY:

☐ Annual Salary: $_____.____
☐ Sabbatical Pay: $_____.____

☐ BO – Bonus ☐ SH – Honorarium ☐ Other – See Remarks ☐ Independent Study (Grades Attached)

☐ **General Ledger Account Number**: __ __-__ __ __ __ __ __ __-__ __ __ __ __ __ Percentage: _____ %

General Ledger Account Number: __ __-__ __ __ __ __ __ __-__ __ __ __ __ __ Percentage: _____ %
** If more than two funding sources are necessary, use Remarks box below*

STATUS: ☐ Full-Time ☐ Part-Time (Adjunct) ☐ *One Year Temporary: Assignment End Date: _____/____/_____
☐ Tenured ☐ Non-Tenured ☐ Visiting ☐ Distinguished
RANK: ☐ Professor ☐ Associate ☐ Assistant

FOR SEPARATIONS:

Last day worked: _____/_____/_____ Termination Date: ____/_____/_____ To be paid through: ____/_____/_____
Reason for separation: _____
_____
Eligible for Rehire? ☐ Yes ☐ No
Have the appropriate departments (IT, Facilities, Locksmith, Purchasing) been contacted? ☐ Yes ☐ No

PAF PREPARED BY (Please print): _____ **DATE:** _____/_____/_____

Remarks	**Authorizations**	**Date Signed**
	Dean:	/ /
	Provost/VP/EVP/Dean of Law School:	/ /
	Finance:	/ /
	President (if applicable):	/ /
	Human Resources:	/ /

FOR HR USE/PAYROLL USE ONLY

☐ Org Chart Updated Processed by: _____ Date Paid: ___/____/____ Benefits Termed: ___/____/____