



PERSONNEL ACTION FORM (PAF)

1	NAME: (Last, First, Middle Initial)	RCUH Employee 6-digit ID Number:
2	Type of Action: select <input checked="" type="checkbox"/> <input type="checkbox"/> New Hire <input type="checkbox"/> Rehire - date of last employment _____ (mm/dd/yyyy)	<input type="checkbox"/> Change Action during employment (skip to line 9)

NEW-HIRES/REHIRES ACTIONS (complete 3, 4, 5, 6, 7, 8 and 15)

3	Employment Category Select <input checked="" type="checkbox"/>	<input type="checkbox"/> Regular	<input type="checkbox"/> Temporary	<input type="checkbox"/> Student	<input type="checkbox"/> Intermittent	<input type="checkbox"/> Relief Crew
		<input type="checkbox"/> Non-Regular (category) _____	<input type="checkbox"/> Other _____			
4	Appointment Period(mm/dd/yyyy): From: _____ To: _____					
5	Project Number(s):		Project A	Project B	Project C	Project D
	Project # (use 7 digit proj. #):		_____	_____	_____	_____
	Budget Category (use 4 digit B.C.):		_____	_____	_____	_____
	% of Charge (must total 100%):		____%	____%	____%	____%
6	Location Code: _____ Project/Program Name _____ Work Location: City/Island: _____ State: _____ Payroll Distribution Code: _____ Sub-Group: _____			Requested Base Pay Rate (select monthly or hourly): \$ _____ per month \$ _____ per hour		
7	Position Title (& Position # for Regular Hires) _____					
8	A. Is Selectee currently an RCUH employee?			<input type="checkbox"/> Yes*	<input type="checkbox"/> No	
	B. Is Selectee currently an employee of a governmental agency?			<input type="checkbox"/> Yes*	<input type="checkbox"/> No	
	C. Does the Selectee currently have relatives employed with RCUH, UH or the State of Hawai'i that have a direct relationship with your project?			<input type="checkbox"/> Yes*	<input type="checkbox"/> No	
	* If you answered yes to any question, please explain in box 15:					

POST NEW HIRE CHANGE ACTIONS (complete applicable fields 9-15)

	A	B	C	D	E
	Place "X" in applicable action rows below in column A	EFFECTIVE DATE (mm/dd/yyyy)	CHANGE ACTION	CURRENT	TO
9			Project No. & Allocation Project Number(s) (use 7 digit proj. #) Budget Category (ies) (use 4 digit B.C.) % of Charge (Total allocations must = 100%)	Proj # BC % Charge A. _____ _____ _____% B. _____ _____ _____% C. _____ _____ _____% D. _____ _____ _____%	Proj # BC % Charge A. _____ _____ _____% B. _____ _____ _____% C. _____ _____ _____% D. _____ _____ _____%
10			FTE%		
11			Pay Rate		
12			Pay Range		
13			Position Title		
14			Other:		

15	COMMENT- Explanation of personnel action (include details of this personnel action): (a) Include name/email/phone number of project's contact person for this action. (b) Attach applicable supporting documentation.	
16	Certification: I certify the information contained in this personnel action is accurate and meets all terms and conditions of the applicable awards being charged, (for federal awards) compliant with 2 CFR 200.430 and all applicable RCUH Policies.	
17	Signature of Principal Investigator and/or Authorized Designee	Date (mm/dd/yyyy)
18	Name/Title (please print)	Email/Phone Number
19	Signature of University of Hawai'i Fiscal Administrator	Date (mm/dd/yyyy)
20	Name/Title (please print)	Email/Phone Number

21 & 22 for RCUH Human Resources Department Use Only

21	RCUH Human Resources Department Authorization:	
		Date (mm/dd/yyyy)
Director of Human Resources or RCUH Human Resources Staff with Delegated Authority		

22	RCUH Data Entry Coding Section		
Coding/Input/Audit Check:			
Plan Type: 10 / 15 11 / 16 18 / 19 / 1A Cov Beg/End Date: _____ Ded Beg/End Date: _____ Plan Type: 40 (SRA) Cov Beg/End Date: _____ Create Gen Ded: GRA Ded Beg/End Date: _____	Plan Type: 60 / 61 / 6X / 6Y Cov Beg/End Date: _____ Ded Beg/End Date: _____ Create Gen Ded: FSAEXP / PRKEXP Ded Beg/End Date: _____ Create Gen Ded: LTCARE Ded Beg/End Date: _____	Plan Type: 23 (Life) Cov/Ded Beg/End Date: _____ Plan Type: 31 (LTD) Cov/Ded Beg/End Date: _____ LVA Payout: Yes / No LSK Payout: Yes / No	
Coded by: _____ Date: _____ Input by: _____ Date: _____ Checked by: _____ Date: _____ (Print Initials)			