UW-L
University of Wisconsin-La Crosse

PERSONNEL TRANSACTION FORM

EMPLOYEE PROFILE

Employee Name: _____ Person ID#: _____
Last, First MI

College/Division: _____ Department/Unit: _____

Title: _____

FUNDING INFORMATION FOR CHANGE

☐ Account Code(s): _____ Fund _____ IBAC _____ DDU _____ %

_____ Fund _____ IBAC _____ DDU _____ % Total salary distribution must equal 100%

_____ Fund _____ IBAC _____ DDU _____ %

TYPE OF CHANGE REQUESTED

☐ Chair Appt: ☐ July 1st – three (3) year term

☐ Other: _____ Start Date _____ End Date

☐ Sabbatical: Duration: ☐ Semester 1 ☐ Semester 2 ☐ Academic Year

☐ % Increase: _____ New Appt % _____

☐ % Decrease: _____ New Appt % _____

☐ Salary Change: $_____ FTB

☐ Career Progression: ☐ IAS ☐ NIAS

New Title: _____

☐ Other Changes: _____

Effective Date: (Please use either the standard contract dates or input other dates below.)

Standard Contract Dates:

☐ Fall Semester 2010	08/30/10 - 12/30/10	☐ Fall Semester 2011	08/29/11 - 12/29/11
☐ 2010-11 Academic Year	08/30/10 - 05/29/11	☐ 2011-12 Academic Year	08/29/11 - 05/27/12
☐ Spring Semester 2011	01/18/11 - 05/29/11	☐ Spring Semester 2012	01/17/12 - 05/27/12
☐ Annual 12 Month Appt	07/01/10 - 06/30/11	☐ Annual 12 Month Appt	07/01/11 - 06/30/12
☐ Federal Annual Year	10/01/10 - 09/30/11	☐ Federal Annual Year	10/01/11 - 09/30/12

or Other Dates: **Month** **Date** **Year** **Month** **Date** **Year**

Start Date: _____ _____ _____ End Date: _____ _____ _____

APPROVAL/REVIEW

I have reviewed and approve this change/update.

_____ _____
Dean/Director or Designee Date

_____ _____
Budget & Finance Date

_____ _____
Provost/Vice Chancellor/Assistant Chancellor or Chancellor Date

HUMAN RESOURCES

Date received: _____ HR Initials: _____ Rev. 01/10

◇ Min/Max ◇ HR Database ◇ Scanned ◇ Payroll U / 1 / / KA