

Project Position Renewal/Payroll Authorization Form*

Date _____

Position Title _____				
Project Title (be specific) _____				
Current Project No. _____			New Project No. _____	
New Project Start Date _____			New Project End Date _____	
Position Number _____		Total Position % _____	Budgeted Amount \$ _____	
____/____/____	____/____/____	____/____/____	% to coding _____	
Fd	Loc	CC/Mgr	Class	Proj/Act
____/____/____	____/____/____	____/____/____	% to coding _____	
Fd	Loc	CC/Mgr	Class	Proj/Act

To renew the employee currently active in the position, please complete the next section.

Employee Name _____		Social Security No. _____
Starting Date _____ (may not be before project starting date)		
End Date _____ (no later than project end date) or earlier pending funding availability		
_____ Project Director Approval		_____ Date
_____ Project Accounting Approval		_____ Date
_____ Grants & Development Approval		_____ Date
_____ Director of Labor Relations Approval		_____ Date

* This form replaces the mass authorization previously initiated by Project Accounting and Grants Development. This form does not replace the Personnel Requisition or the Request to Fill or Create Pool or Agency Positions forms

Original completed form to Human Resources

CC: K. Brehmer, G. Marsh, R. Prust, Project Director

Form Revised 4/26/00