



State Affiliated Corporation

Prepared by: Project Director:

Extension: Date:

Employee Information myWSU ID# Name: Last First M.I.

Comments Reason Code:

Current Status:

University Support Staff / Unclassified form with fields for Exempt, Regular, Faculty, Professional, Instruction, Length of Appointment, Grade/Step, Hourly/Other Amt., Org. No., Organization Name, GU, RU, Fund#, Position No., Position Title, FTE, Stop Date.

New Status:

Effective Date:

New Status form identical to Current Status form.

Required Signatures:

Office of Research - Assoc. Director of Post Award: Date Dean/Budget Review Officer: Date University Budget Office: Date

BANNER APPROVED FUNDING - UNIV. BUDGET OFFICE ONLY: FTE: PClass: EClass:

Table with 6 columns: Position, Fund, Organization, Account, Amount, % FTE

Banner Forms Completed: POSN PBUD JOBS