

Office of Human Resources

DEPARTMENTAL REQUEST FOR PERSONNEL ACTION FORM (A-21) - REV 10/2022

OHR OFFICE USE ONLY A21 Log # _____	DATE: _____
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1. PERSONNEL DATA	2. DEPARTMENT DATA
Employee Name: _____	Department Name: _____
Cardinal Employee ID Number: _____	Mailing Address: _____
Banner ID Number: V- _____	Contact Name: _____
OHR OFFICE USE ONLY	Supervisor Name: _____
Effective Date of Action: _____	Phone Extension: _____

3. TYPE OF ACTION	Select Type of Action and Reason Code from the dropdown

3(a). TEACHING & RESEARCH FACULTY ONLY

Comments/Additional Information	
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4. POSITION TYPE (Select from one from the dropdown)	5. PAY	6. ASSIGNMENT STATUS

7(a). SOURCE OF FUNDS	8. OHR OFFICE USE																																																															
BUDGET OFFICE ONLY-Use this Section for Recruitment (Funding for Salary BEFORE Hiring Salary)																																																																
Funding Available: \$ _____	Process Date: _____																																																															
Budget Office Approval (Signature Required)																																																																
Position Number: _____	OHR Approval Signature																																																															
Position Title: _____																																																																
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7(b). PROPOSED or NEW POSITION/ACTION	9. BUDGET/OHR USE ONLY (FINAL HIRING SALARY FROM 7b)																																																	
Cardinal Coding																																																		
New Position Number: _____	Final Budgeted Amount \$ _____																																																	
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