INSTRUCTIONS FOR CSUSB FACULTY/STAFF OVERLOAD / ADDITIONAL EMPLOYMENT PERSONNEL TRANSACTION REPORTS

(Compliance with State's <u>HR 2002-05</u> and <u>TL-SA2003-03</u>)

All changes in employment status must be completed in every case where there is an employee change in job classification, salary rate, job status or termination. This form must be received by Human Resources - University Enterprises Corporation at CSUSB ("UEC") <u>4 DAYS PRIOR</u> to the effective date.

EMPLOYEE LEGAL NAME: Enter employee's legal name (last name, first name, middle initial,).

ANTICIPATED START DATE: Enter as follows: *New Hires* - first day employee is scheduled to work, *Rehires* - first day employee returned to work, *Reappointment* – first day of new contract period, *Change* – date change is to occur. *Separation* – date separation is to occur.

ACTION TYPE: New Hire/Rehire = new employee for your department or former employee of your department that will begin working for you again, *Reappointment* = Department is maintaining employee into new contract period, *Separation* = no longer working for this department/project as of effective date; *Must also enter a reason for separation, etc.*

STATUS TYPE: Check only one. If CSUSB Staff, check state classification of exempt or non-exempt.

FUNDING SOURCE: <u>MUST</u> enter all four current funding source numbers Account # / Fund# / Department # / Project # (23 alphanumeric digits total). If there is a change in funding source.

DISTRIBUTION %: Indicate what percentage of time should be attributed to that funding source.

FACULTY ADDITIONAL PAY: Must be processed through mycoyote prior to the start of each semester. Retro approvals will need to be done by the college AA/S.

STATE PAY RATE: List employee's hourly pay rate and if non-exempt staff, also enter their overtime rate. If a change is being made to the pay rate, enter the current rate, before rate change. If the project is a Federal Grant /Contract, the hourly rate for CSUSB Staff and Faculty must be equal to or less than their current CSUSB rate of pay. All pay rates must be verified by authorized state personnel, (i.e. Department AAS).

NEW STATE PAY RATE: If the change is to the pay rate, list the new state rate of pay and if non-exempt staff, enter their new overtime rate.

UEC JOB TITLE: Print the employee's working job title for University Enterprises Corporation at CSUSB.

WORK LOCATION: Check all the apply.

THIS POSITION: Check one. This indicates to Human Resources if additional information is required for this position.

COMMENTS: Use this space to inform the Human Resources of special instructions or information.

DIRECTOR/PI: Please print the name, email address and phone number/extension of the department/project Director or Principal Investigator.

PRIMARY CONTACT: If the project/department has a specific contact person (such as an Administrative Assistant) for Human Resources to use as a primary contact, enter their name, email address and phone number/extension.

SIGNATURES: The following signatures are required: UEC Authorized Signer for the Account (authorized signers cannot sign for their own employment transactions, instead this line should be signed by their direct supervisor), Print name/Dean or Authorized State MPP and signature, Print name and signature of college AA/S or appropriate state personnel for State Pay Rate Verification, UEC Budget Approval and a UEC Human Resources Representative.

Adobe Workflow Recipients:

Submitter: Individual completing the PTR. If you are submitting the PTR and the PI of the project, please use this PTR

SPA Overload PTR (Submitted by PS)

PI/PD: Principal Investigator/ Project Director/ Authorized Signer

College AAS: College Analyst

Dean/ State MPP: Employee's Dean/Chair or State Supervisor

SPA HR: Ingrid Valdez (<u>ivaldez@csusb.edu</u>)

Budget RA: Research Analyst (Julie Wessel, Yolanda Meyer, Walid Wahba) spon_pgm_fdn@csusb.edu

UEC-HR: <u>uec-hr@csusb.edu</u>

CC'd: Siska Purnawan or <u>uec-payroll@csusb.edu</u>

Document Name *

Employee/Employment PTR SPA - Fund/Project- Employee's Last Name-

Please add the FUND/ PROJECT and Employee's Last Name to the "Document Name"

For Example: SPA Overload PTR - SXXX/LLXXXX- Smith

Click on Send. This will open the PTR, so you are able to complete it.

If you have any questions regarding this form, please contact the Sponsored Programs HR Specialist at <u>ivaldez@csusb.edu</u> or 909-537-3069.