



EMPLOYMENT ACTION FORM

PLEASE COMPLETE THE FOLLOWING FORM ENTIRELY AND SUBMIT TO THE HUMAN RESOURCES/BUSINESS OFFICE AT LEAST 5 BUSINESS DAYS PRIOR TO THE REQUESTED START DATE. NOTE: EMPLOYEES MAY NOT BEGIN WORKING UNTIL ALL NEW HIRE PAPERWORK OR OTHER REQUIRED DOCUMENTATION HAS BEEN SUBMITTED.

ACTION (SELECT ONE): _____ ANTICIPATED START DATE: _____

REPLACEMENT FOR: _____ ANTICIPATED END DATE: _____

EMPLOYEE INFORMATION

NAME (LAST, FIRST, M.): _____ EMPLOYEE ID #: _____

CURRENT UCLA STUDENT: YES NO WORK-STUDY AWARD: _____

CURRENT EMAIL: _____ CURRENT PHONE: _____

ARE ANY OF THE EMPLOYEES RELATIVES EMPLOYED WITH GSE&IS?

NO YES (LIST THEIR NAME & UNIT) _____

JOB INFORMATION

APPT. TYPE (SELECT ONE): _____ APPT %: _____ (EX. 10 HRS/WEEK = 25%)

JOB/REQ#: _____ JA# _____ TITLE CODE: _____ PAYROLL TITLE: _____

STEP/GRADE: _____ PAY RATE: _____ PER (SELECT ONE): _____

PRIMARY SUPERVISOR: _____ BACKUP TIMESHEET SUPERVISOR: _____

FUNDING SOURCE(S):

ACCOUNT CC FUND PROJECT CODE SUB % TIME

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* PLEASE ATTACH SEPARATE DOCUMENT IF ADDITIONAL FUNDING SOURCES ARE NEEDED.

BUSINESS OFFICE FUND MANAGER: _____

CAMPUS LOCATION INFORMATION

CAMPUS WORK EXT: _____ ROOM/BLDG ADDRESS: _____ MAIL CODE: _____

REQUEST SUBMITTED BY:

NAME (PLEASE PRINT): _____ INITIAL: _____

UNIT: _____ DATE: _____

IF YOU ARE REQUESTING ACCESS TO UCLA PROPRIETARY SYSTEMS (EX. BRUIN BUY, TRAVEL EXPRESS, ONLINE FINANCIAL SYSTEM REPORTS [OFSR], ETC.) PLEASE EMAIL ARIS SANTIAGO AT santiago@gseis.ucla.edu WITH "DSA" IN THE SUBJECT LINE.