|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **LEHIGH UNIVERSITY PAYROLL ASSIGNMENT FORM (PAF)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Employee Information** | | | | | | | | | | |  | | | | | | | | | |  | | | | **Department Information** | | | | | | | | | |  |
|  | Employee Name: | | |  | | | | | , | | |  | | | | | | | | | |  | | | |  | | | | | | | | | |  |
|  |  | | | Last Name | | | | |  | | | First Name | | | | | | | | | |  | | | | Department where Payroll records are kept | | | | | | | | | |  |
|  | LIN/ID Number: | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Check Dist Location: | | | |  | | | | |  | | | | | | | | | | | | | | | |  | | | | | | Ext: | | |  |  |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | Department Contact Person (*For questions concerning this form*) | | | | | | | | | |  |
|  | New Hire | | | | | | New Position | | | | | | | | | Other (provide comments below) | | | | | | | | | | | | | | | | | | | |  |
|  | **Job Detail** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  | **Position Title** | | | | | | **Position No.** | | | | | | **Salary Per Pay** | | | | | **Salary Grade** | | | | **E Class** | | **Pay ID** | | | **FTE\*** | | **Job Change Reason\*\*\*** | | | | | |  |
|  |  |  | | | | | |  | | | | | |  | | | | |  | | | |  | |  | | |  | |  | | | | | |  |
|  |  | \*FTE: Hours per week/(37.5 or 40)  \*\*APPT %: Months in year/12 \* 100  \*\*\*See reverse side for job change reason codes | | | | | | | | | | | | **Annual Salary** | | | | |  | | | |  | | **APPT %\*\*** | | |  | |  | | | | | |  |
|  |  |  | | | | |  | | | |  | |  | | |  | |  | | | | | |  |
|  |  |  | | | | |  | | | |  | |  | | |  | |  | | | | | |  |
|  | **Index Distribution** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  | **Index** | | | | **Index Distribution (Must equal 100%)** | | | | | **Start Date** | | | | | | **End Date** | | | | **Dollars** | | | | | | **Financial Manager Approval** | | | | | | | **Date** | |  |
|  | 1 |  | | | |  | | | | |  | | | | | |  | | | |  | | | | | |  | | | | | | |  | |  |
|  | 2 |  | | | |  | | | | |  | | | | | |  | | | |  | | | | | |  | | | | | | |  | |  |
|  | 3 |  | | | |  | | | | |  | | | | | |  | | | |  | | | | | |  | | | | | | |  | |  |
|  | 4 |  | | | |  | | | | |  | | | | | |  | | | |  | | | | | |  | | | | | | |  | |  |
|  | 5 |  | | | |  | | | | |  | | | | | |  | | | |  | | | | | |  | | | | | | |  | |  |
|  |  | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  |
|  | **Comments** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | **Authorizations Required (see form instructions)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Dean/Director: | |  | | | | | | | | | | Date: | |  | | | | | Vice President/Provost: | | | | | | |  | | | | Date: | |  | | |  |
|  | **Authorizations for All Changes to Index Numbers 212693 - 212999, 529xxx - 549999, 590xxx - 590999 and 603500 - 603999** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Office of Research Approval: | | | | |  | | | | | | | | | | | | Date: | | | | | |  | | | | |  | | | | | | |  |
|  | **Important:** Use this form to supply new appointment information to the Payroll Office. Please attach the offer letter if not already on file from another source. The Payroll Office staff cannot make any changes without proper authorizations. Please retain a copy of this form for your departmental records. Please address questions to: INPAYROL@lehigh.edu. Send completed form electronically via the FileSender link which can be found on the Payroll website or mail completed form in a sealed envelope to the Payroll Office, 306 S. New Street, Suite 464 Bethlehem, PA 18015. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Job Change Reason Codes** | | | | | | | | | |
|  | Code | Description |  | Code | Description |  | Code | Description |  |
|  | **ADJUS** | Adjustment |  | **FLEXE** | End Flexible Schedule |  | **MKTCH** | Market Change |  |
|  | **ANNIN** | Annual Increase |  | **ENDFS** | End Funding Source |  | **MERIT** | Merit Increase |  |
|  | **NEWPO** | Assigned New Posn # |  | **LOAEN** | End Leave of Absence |  | **NEEXN** | NE - EX - Adj for Hours Only |  |
|  | **BEGFS** | Begin Funding Source |  | **ETOVL** | End Overload/CAP |  | **NEEXI** | NE to EX with Ingrade Adj |  |
|  | **BSEME** | Begin Semester |  | **PERSE** | End Personal Leave |  | **NEEXU** | NE to EX with Upgrade Adj |  |
|  | **BEGSR** | Begin Summer Research |  | **SABBE** | End Sabbatical Leave |  | **NEWHI** | New Hire |  |
|  | **CMPEN** | Cash Merit Payment End |  | **ESEME** | End Semester |  | **ELIMI** | Position Elimination |  |
|  | **CMPST** | Cash Merit Payment Start |  | **ENDSR** | End Summer Research |  | **PREM** | Premium Change |  |
|  | **DATAC** | Data Correction |  | **EQADJ** | Equity Adjustment |  | **PROMO** | Promotion |  |
|  | **DEATH** | Death |  | **INGRD** | In Grade Adjustment |  | **PRORG** | Promotion - Reorganization |  |
|  | **FTEDE** | Decrease in FTE |  | **FTEIN** | Increase in FTE |  | **RECLS** | Reclassification |  |
|  | **DEMOT** | Demotion |  | **INSIN** | Ineligible to work - INS |  | **REHIR** | Rehire |  |
|  | **DOWNG** | Downgrade |  | **INORG** | Ingrade Adj - Reorganization |  | **REORG** | Reorganization |  |
|  | **EXNEN** | EX to NE - Adj for Hours Only |  | **INGTR** | Ingrade Adjustment - Transfer |  | **RETIR** | Retirement |  |
|  | **EXNEI** | EX to NE with Ingrade Adj |  | **INTER** | Interim Appointment |  | **RETAG** | Retirement Agreement |  |
|  | **EXNEU** | EX to NE with Upgrade Adj |  | **INVAL** | Invalid Information |  | **MPRET** | Return to Base Premium Rate |  |
|  | **FMLAE** | End FMLA Leave |  | **JOBFA** | Job Family Change |  | **TERMI** | Termination |  |
|  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **E-Class Codes** | | | | | | | | | |
|  | Code | Description |  | Code | Description |  | Code | Description |  |
|  | **AD** | University Administration |  | **FA** | Adjunct Faculty |  | **T2** | Temporary Exempt |  |
|  | **C1** | Centennial School Faculty |  | **N1** | Non-Exempt – Full Time - 37.5 |  | **T4** | Temporary Non-Exempt |  |
|  | **E1** | Exempt – Full Time |  | **N2** | Non-Exempt – Part Time - 37.5 |  | **V1** | Visiting Employee |  |
|  | **E2** | Exempt – Part Time |  | **N3** | Non-Exempt – Full Time - 40 |  | **V2** | Visiting Employee – Part Time |  |
|  | **F2** | Faculty – 11 and 12 month |  | **N4** | Non-Exempt – Part Time - 40 |  |  |  |  |
|  | **F9** | Faculty – 9 and 10 month |  | **S2** | Student Employee – SM |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |