



Woods Hole Oceanographic Institution
Human Resources Office

AUTHORIZATION FOR PERSONNEL ACTION

Name:	Date:
Department:	Job Title:
Expected Funding:	Phone Extension:
WHOI Location - Bldg/Room#:	MS#:

IDENTIFY TYPE OF ACTION (ATTACH EXPLANATION AND ALL OTHER NECESSARY DOCUMENTATION)

Addition; if replacement, name employee being replaced:
Position Requisition Number (If Applicable):

Is the individual a foreign national? Yes No

<input type="checkbox"/> Posting Waiver	<input type="checkbox"/> Extension of Temporary Appointment
<input type="checkbox"/> Promotion	<input type="checkbox"/> Leave of Absence Any vacation balance will be paid out unless otherwise requested. Please do not pay out vacation <input type="checkbox"/> (attach employee request)
<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Status If status is changing to Casual, any vacation balance will be paid out unless otherwise requested. Please do not pay out vacation <input type="checkbox"/> (attach employee request)
<input type="checkbox"/> Transfer	<input type="checkbox"/> Other:

Effective Date:

<input type="checkbox"/> Regular	<input type="checkbox"/> ¾-Time (≥ 30 hrs/wk)
<input type="checkbox"/> Temporary Until	<input type="checkbox"/> Half-Time (≥ 20 hrs/wk)
<input type="checkbox"/> Full-time (40 hrs/wk)	<input type="checkbox"/> Casual Labor (< 20 hrs/wk)

Recommended Salary: \$ _____

Supervisor _____

Date _____

<u>DEPARTMENTAL ROUTING</u>	<u>ADMINISTRATIVE ROUTING</u>
_____ Dept. Chair / Admin Mgr. Hiring Date	_____ Foreign National Advisor (<i>if applicable</i>) Date
_____ Dept. Chair / Admin Mgr. Releasing Date	_____ Human Resources Date
_____ VP & Dean (Post-Doc & Education Appointments) Date	_____ EEO Officer Date
SEND TO HUMAN RESOURCES OFFICE	_____ VP / President and Director Date
	FINAL SALARY: \$ _____

Supervisor Notified; Date: _____