

# *Renewal Authorization Form*

## *Computer Science Department*

**TO: Computer Science Personnel Office: 227 Eng. VI**

*Please process personnel action papers as follows:*

Name: \_\_\_\_\_ Effective Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

UCLA ID # \_\_\_\_\_ UCPATH # \_\_\_\_\_ Position # \_\_\_\_\_

Supervisor/Prof: \_\_\_\_\_ Email: \_\_\_\_\_

**Section I. Rehire, Additional Accounts, Deletions, Extension of Appointment, Change of Percentage, Termination**

*This action represents: (Please check all that are applicable)*

Rehire   
  Additional of account #   
  Deletion of Account #   
  Extension of Appointment  
 (%) Percentage Change   
  Renew   
  Fund Change   
  Termination

Requested Pay Rate: \$ \_\_\_\_\_

**\*GSR Appointment:**

Fall \_\_\_\_ Winter \_\_\_\_ Spring \_\_\_\_ /Or Academic Year \_\_\_\_

FEE \_\_\_\_\_ + NRST \_\_\_\_\_

You must establish your intent to make California your home one year prior to the residence determination date of the term for which you request resident status. You must be continuously physically present in California for more than one year (366 days) immediately prior to the residence determination date of the term for which you request resident status.

Comments: \_\_\_\_\_

Computer Science Account	CC	Fund	Account Name	Add - A Del. - D	Percentage	Effective Date	Ending Date	Fund Mgr. Approval
4-	-	-						
4-	-	-						
4-	-	-						
4-	-	-						

PI Approval Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**UCPATH PROCESSING CHECKLIST**

EMPLOYEE NAME: \_\_\_\_\_ PATH ID: \_\_\_\_\_

UC ID: \_\_\_\_\_ HIRE/REHIRE DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_ SUPERVISOR/PROF: \_\_\_\_\_

1. POSITION REQUESTED: Transaction #: \_\_\_\_\_

2. POSITION NUMBER: \_\_\_\_\_

3. FUNDING REQUESTED: \_\_\_\_\_

4. I-9 TRACKER SENT: \_\_\_\_\_

5. I-9 DOCS REVIEWED/**PROFILE ID#**: \_\_\_\_\_

6. HIRE/REHIRE ENTERED: \_\_\_\_\_

**(WS-enter pool ID#) (Mail UAW 2865 form to Labor Relations within 5 days of receipt) (Mail Oath/patient to CRU office)**

7. HIRE APPROVED BY UCPC: \_\_\_\_\_

8. FLSA **(If applicable)**: \_\_\_\_\_

9. GLACIER: \_\_\_\_\_

10. TRS: \_\_\_\_\_

11. REMISSION: \_\_\_\_\_

12. DEFERRAL: \_\_\_\_\_

13. SSN LETTER: \_\_\_\_\_

**FAU:** \_\_\_\_\_

**NOTES:**