

PERSONNEL ACTION FORM

Employee I.D # _____
(For RFCUNY use only)

Last _____ First _____ Middle Initial _____
Employee name as recorded on Social Security card (and Visa where applicable)

RF Job Title (from PVN) _____ 4 Digit RF Job Code from PVN

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 Sponsor's Functional Title _____

Supervises Employees? Yes No PVN#

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 Immediate Supervisor _____

Bi-Wkly Work Schedule	Wk. 1	M	T	W	Th	F	Sa	Su		Wk. 2	M	T	W	Th	F	Sa	Su	
Hours per day																		

Work Location

- Baruch City CUNY CAT CUNY SPH Hunter Lehman Queens Staten Island
 BMCC CN Jrnlsm CUNY Central CUNY SPS John Jay Macaulay Honors Queensborough York
 Bronx CUNY 311 CUNY Law Graduate Kingsborough Medgar Evers RFCO
 Brooklyn CUNY ASRC CUNY SLUS Hostos LaGuardia NYC College of Technology S&C Guttman

Employee's physical work location/campus if not the campus selected above _____

Action to be Taken

- New Hire (Attach new-hire paperwork from RFCUNY's website to avoid outdated forms and send together with this PAF to the Research Foundation)
 Leave of Absence: Type of Leave _____ Date Leave Began _____ Date Returned From Leave _____
 Other/Comments _____

Status of Position

- Regular - These positions have a predefined work schedule and a predefined appointment period (usually more than 90 days).
 Temporary - Employees are employed on a full-time or part-time basis for one job only for a set duration of no more than 19 weeks in any 12-month period, have no substantial expectancy of continued employment and have been notified of this fact. These employees are not eligible for annual leave.
 On Call - Employees are employed for no more than 19 hours a week, working sporadically with no established pattern of regular continuing employment. They do not have a fixed schedule, are not required to be at or near the work site, can refuse an assignment when offered, and are only paid for hours actually worked. These employees are not eligible for annual leave.

Student Status Undergrad Master PhD
 Visa Status F1 J1 H1 B
 Other (specify) _____

Is employment contingent upon maintaining student status?
 Yes No
 Is this a Graduate Research Assistant (GRA) appointment?
 Yes No
 If yes, proof of full-time matriculated status as a CUNY Doctoral student must be attached.
 Is this a Postdoctoral trainee appointment?
 Yes No

Is the employee also employed on CUNY or Tax Levy Payroll? Yes No If yes, a CUNY multiple positions authorization form must be attached.

Project#	Sub	Year	Title Code	Start Date mm/dd/yy	End Date mm/dd/yy	Rate of Pay	Bi-Weekly Hrs/P.P. <38=PT-B/GRA >39-69=PT-A >70=Full Time	Salary Encumbrance Salary plus fringe rate and MTA tax
							Salary	\$
							Hrly	

Employee Initials _____

*
Project Director Signature _____ Print Name _____

Authorized Signatory _____ Print Name _____

Phone _____ Email _____ Date _____

Phone _____ Email _____ Date _____

*I understand that Research Foundation policy requires that employees utilize their accumulated leave within the period of their appointment. I agree that I will meet with the employee within 30 days of hire to schedule said leave. Should the employee fail to use their accumulated leave, regardless of reason, I understand that such other accounts that I or the college may have at the Research Foundation will be liable for any annual leave-related expenses that cannot be covered by the sponsor(s) on whose award(s) this employee is paid and that the Research Foundation will have no responsibility to cover the costs of such leave.

Acknowledgment of RFCUNY Employment Terms & Conditions

I acknowledge that I must comply with the rules, policies, and procedures applicable to RFCUNY and CUNY campuses or CUNY affiliated worksite to which I am assigned.

I certify that my scheduled hours for this appointment do not conflict with any other concurrent RFCUNY appointment or other appointment including CUNY or Tax Levy positions. I understand that any conflicts of this nature may result in the immediate termination of this or any subsequent appointments.

I accept this position and salary described with the understanding that my appointment is subject to availability of funds. I understand that in this position, or any subsequent position, I am a hire of RFCUNY. I acknowledge that my employment is NOT a contract of appointment and that my appointment is not fixed for any period or term.

I understand that unless otherwise governed by terms of a collective bargaining agreement, all decisions respecting my appointment are at the sole discretion of RFCUNY.

I understand that if I am appointed in a position that is covered by a collective bargaining agreement between RFCUNY and the Professional Staff Congress which requires the payment of union dues or any agency fee, my failure or refusal to timely pay such union dues or agency fees may result in the termination of my appointment.

I acknowledge that I have been informed that RFCUNY is an E-Verify Employer and that as a condition of my appointment my work authorization documents will be verified through the Social Security Administration and the Department of Homeland Security.

I acknowledge that I will use any annual leave earned within my appointment period before the end of my appointment. I will meet with my Principal Investigator within 30 days of the start of my appointment to discuss and schedule my annual leave.

I acknowledge that as a condition of appointment with RFCUNY, I must sign a disclosure notice and authorization for a background check. The background screening procedure applies to all prospective Full-Time and Part-Time A employees. Existing Full-Time and Part-Time A employees will be screened upon promotion or rehiring after a break in service. It also applies to prospective Part-Time B and Graduate Research Assistant (GRA) employees in positions that have contact with vulnerable populations. A standard background check consists of a social security trace and a review of pertinent criminal history records and sexual offender registries. A consumer credit check is conducted only if the employee has fiduciary or signatory authority over funds of \$10,000 or more. A motor vehicle search will be conducted only if the employee is required to drive a vehicle

during work hours. In addition, RFCUNY administers programs that are funded by the US Government, either directly or as pass-throughs. In compliance with the restricted parties screening provisions under the Office of Foreign Assets Control (OFAC), all current, new hire, and rehire employees will be checked against lists of restricted parties maintained by the US General Services Administration (GSA), US Office of Foreign Assets Control (OFAC), the System for Award Management (SAM), among others, to determine they are eligible to receive payments/funds through the Research Foundation.

I acknowledge that if I am appointed on a project sponsored by the NYC Dept. of Ed., NYC HHC or any other project sponsor and am deemed by them to be ineligible to provide services under the project, I am subject to the immediate termination of my appointment and will not be entitled to receive any additional compensation.

I acknowledge that if my duties and responsibilities expose me to confidential, private, or proprietary information, I agree to maintain such information in confidence and not to disclose it other than to RFCUNY employees or its agents who have a legitimate business need to know in accordance with the RFCUNY confidential information policy.

I acknowledge that where an appointment letter makes my position contingent on the maintenance of graduate student status, suspension or loss of student status shall constitute sufficient cause for RFCUNY's suspension or termination of my appointment.

I acknowledge receipt of RFCUNY employment policies and procedures, and I understand that it is my responsibility to read and comply with the policies.