

**RHODE ISLAND COLLEGE  
STUDENT EMPLOYMENT OFFICE (CAREER DEVELOPMENT CENTER)  
PERSONNEL ACTION FORM (PAF FORM)**

(To complete form electronically, click designated lines on form and begin typing in highlighted area)

Student Name: \_\_\_\_\_ Emplid: \_\_\_\_\_

New Job Title: \_\_\_\_\_

New Rate of Pay: \_\_\_\_\_

Dept. Name: \_\_\_\_\_ Dept #: \_\_\_\_\_

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**Pay Rate/Title Change within a department.**

**(Job Description for new pay rate/title must be on file with the Student Employment Office/Career Development Center.)**

Current Rate of Pay: \_\_\_\_\_ New Rate of Pay: \_\_\_\_\_

Current Job Title: \_\_\_\_\_

Date of Last Pay Increase: mm/dd/yyyy

New Job Title: \_\_\_\_\_

Effective Date of Change: mm/dd/yyyy

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**Position Funding Change** *(Please check appropriate boxes below.)*

Currently on Department Funds, transfer to Work-Study:  Yes  No

Currently on Work-Study, transfer to Department Funds:  Yes  No

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Please Note: All changes will take effect at the beginning of the next pay period.

\_\_\_\_\_  
Authorized Signature mm/dd/yyyy  
Date

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\_\_\_\_\_  
Payroll Office Signature mm/dd/yyyy  
Date entered into PeopleSoft

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