



**CSU
PUEBLO**

OFFICE OF HUMAN RESOURCES, CIVIL RIGHTS COMPLIANCE & TITLE IX

2200 Bonforte Blvd.

Pueblo, CO 81001

csupueblo.edu/human-resources

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PERSONNEL ACTION FORM

☐ CLASSIFIED

☐ FACULTY

☐ ADMINISTRATIVE PROFESSIONAL

NAME: _____ NET ID: _____

EFFECTIVE DATE: _____

REASON FOR CHANGE

☐ Transfer/promotion

☐ Costing allocation – new

☐ Department change

☐ Title change

☐ Costing allocation – amended

☐ Salary/equity adjustment

☐ Other _____

**Complete only fields
relevant to change**

FROM:

Start date of change – required field

TO:

Required only if there is an end date to
change, ie grant funding for a semester

SALARY:

POSITION TITLE:

DEPARTMENT:

ACCOUNT NUMBER(S)
AND PERCENTAGE(S):

COMMENTS:

Approval signatures—gather all signatures prior to sending PAF to Human Resources

Prepared by: _____

Date: _____

Fiscal Officer: _____

Date: _____

Dean/Director: _____

Date: _____

Budget: _____

Date: _____