

This form may be used currently for the following:

- Termination of Non-Permanent Positions/Stipends, such as:
 - Classified Temporary
 - o Student Hourly
 - o Graduate Assistants
 - Other temporary employment positions
 - Stipends

ROUTING

In the first section, for routing purposes, please select all roles REQUIRED to review and approve this PAR. For each REQUIRED role, please provide the MUNet Username of the person that will participate in that role. First name, last name and email address will prefill if the correct MUNet Username is entered.

In the second section, please select all optional reviewers and provide the MUNet Username of the person that will participate in that role.

In the third section, choose the appropriate VP to approve.

Click NEXT to move to the next screen. If you need to save your progress, click SAVE PROGRESS. To get back to it, go to MyMU.marshall.edu, click on Dynamic Forms, then go to My Forms > Pending/Draft Forms.

			Some content n	* = required field nay be updated based on selection	
MARSHALL	PAR: Terminati	on of Non-Permanen	t Positions/Stipends		
This p	age is to be completed only by the	initiator of the PAR. Please clic	ck Next to continue to the next pa	age.	
	or routing purposes, please sequired role, please provide the			that role.	
Please select at least one: If you are authorized to sign as t satisfy the signature requiremen	he Supervisor/Manager, Chair, or Pl, t for your role.	you can skip selection of your ow	n role. The signature you provide a	as the initiator of this PAR will	
Role / Participant	MUNet Username	<u>First Name</u>	Last Name	E-Mail Address	
🗌 Chair					
Principal Investigator					
Supervisor / Manager					
Please select optional reviewer	's:				
Role / Participant	MUNet Username	First Name	Last Name	E-Mail Address	
 Business Mgr. 					
Dean / Director					
UP Student Affairs					
Select which Senior Vice President should review and approve this PAR.					
Please select one:					
Sr. Vice President / Provost	* Choose	~			
Save Progress Next					

EMPLOYEE INFORMATION

Enter the Employee MUID (number beginning with 90#...) The employee's information will prefill with information available in Banner. Please note: the only information you can change in this section is the phone number and address. You will also confirm the address. Making changes to that section will not update in Banner, the student or new employee should follow standard procedure for information changes in Banner.



PAR: Termination of Non-Permanent Positions/Stipends

	Employee Inf	ormation		
MUID:	Date of Birth:		Last 4 Digits SSN:	
First Name:	Middle Initial:		Last Name:	
Email:	Phone:	0	Mobile:	
Address 1:				
Address 2:				
City: *	State:		Zip: *	
* □ I confirm the address above	is correct. I understand it is the address us	sed on the emp	ployee's paychecks and W2.	

JOB INFORMATION

SCROLL to the Job Information section and select the Job to Terminate from the drop-down of available jobs for this employee. Enter the End Date, End Time (optional), and Position Number. Position Title, Fund, and Org will prefill. Then enter the Reason for Termination and Comments (optional).

The "Final End Date" will be entered by Human Resources.

SCROLL to the bottom of the page and CLICK "Next". Enter your first and last name to complete the signature, then CLICK Submit.

Job Information					
Job to Terminate: *[Choose	~				
End Date:	End Time (optional):	Final End Date (entered by HR):			
Position:	Suffix:	EClass Code:			
Fund:	Org:				
Reason for Termination: *[Choose					
	2				
* (click to sign)					
Signature	Date				

SUPERVISOR/MANAGER/CHAIR/BUSINESS MGR/DEAN/DIRECTOR/VICE PRESIDENT SIGNATURES & SUBMISSION

Each person selected on the first page will have a section where they can sign for approval. The individual should CLICK the link in the email notification, navigate to the second page and SCROLL down to the Approvals section. Enter optional comments.

CLICK the signature area and enter your first and last name to Sign Electronically.

Scroll to the bottom of the form and CLICK Submit Form.

If you deny this request or notice an error, please select RETURN FOR REVISION. When doing so, a drop-down field will be provided. Select the individual who will need to correct data on the form (likely the initiator) and write a note with what needs corrected and be sure to include your name.

	Approvals
	Supervisor
Printed Name:	
Comments (optionel):	
	1
	11
Supervisor	Date
	After cigning, please seroll down and click Submit Form
	After signing, please scroll down and click <u>Submit Form.</u> If you do not approve this request, please click Return for Revision.
	Vice President
Printed Name:	
Comments (aptionel):	
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PAD//PTactGroup or Prove	
PARVPTestGroup or Proxy	Date
PARVPTestGroup or Proxy	
PARVPTestGroup or Proxy	Date After signing, please scroll down and click <u>Submit Form</u> , If you do not approve this request, please click <i>Return for Revision</i> .
PARVPTestGroup or Proxy	
PARVPTestGroup or Proxy	After signing, please scroll down and click <u>Submit Form</u> . If you do not approve this request, please click <i>Return for Revision</i> .
PARVPTestGroup or Proxy Printed Name:	After signing, please scroll down and click <u>Submit Form</u> . If you do not approve this request, please click <i>Return for Revision</i> .
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Previous Save Progress Next

SAVING INFORMATION AND COMPLETING SAVED FORMS

If you need to save your progress, click SAVE PROGRESS. To get back to it, go to MyMU.marshall.edu, click on Dynamic Forms, then go to My Forms > Pending/Draft Forms.

You may choose to PRINT the form after signing. (You will have the option to view and save/print a PDF version of the form after processing.)

CORRECTIONS TO A PAR USING DYNAMIC FORMS

If your PAR needs to be corrected, the PAR will be returned to you (initiator) with a note that says what needs

changed. You will open the PAR and make the necessary changes and submit the form as you did previously.

If you are the approving area returning the PAR, you will need to add a subject and a note before returning.

Return For Revision	
This form will be returned for revision. Please enter the content of the email that will be sent to the previous form participant(s) to submit the form.	o prompt them to review and/or re-
To	
Subject	
This field is required.	
Body	
Source Q ⊕ X 5 @ @ @ 4 → Q t3 ₩ = 4 # #	
B I U X ₂ X ² → E → E = Styles - Format - Arial - 13px - ▲ - □ -	
	Paragraphs: 0, Characters (with HTML): 0
This field is required.	
Return this form for revision Cancel and return to form	

CANCELING A PAR USING DYNAMIC FORMS

If your PAR needs to be canceled, you can email the PAR group at par@marshall.edu. If you are the department

canceling the PAR, you will need to reply to the email stating that it has been canceled.