

Instructions for Use of the Marshall University Research Corporation's On-Line PERSONNEL ACTION REQUEST (PAR)

Individuals who regularly prepare Personnel Action Requests (PARs) may print out and keep these instructions in a handy location. The "originator" for purposes of this form is deemed to be the principal investigator/project director or dean who originates a PAR. This can be a clerical/paraprofessional employee acting in behalf of a principal investigator/project director or dean.

USE: The on-line Personnel Action Request (PAR) form replaces any earlier typewritten versions of the PAR.

FIELDS: The form is an Adobe document (.pdf). Fields that the originator needs to complete are set up as "fillable" fields – required content may be keyed in.

- 1) MURC Fund/ORG: Please type in the MURC fund number AND org in this space. This is the MURC banner fund number assigned by MURC. Please DO NOT SUBMIT PAR's without this field completed.
- 2) Project Title: Please type in the project title of the award that will be funding the position on the PAR.
- 3) Full Name: Please type in the employee's full name as it appears on the employee's social security card. This is an Internal Revenue Service requirement for W-2 processing. Please see the instructions for completing an "I-9" form for definitions of other "valid" forms of ID. <http://www.hr-serv.net/forms/USCIS-I-9-053105.pdf> Please type last name, first name, and then middle name.
- 4) Address: Please type in the current address of the employee. Please be sure to update this as needed, as this address is where the employee's W-2 will be mailed in January of each year.
- 5) SS#: Please type in the employee's social security number. It is extremely important that this field be completed correctly.
- 6) Birth date: Please type in the correct birth date of the employee. Please use Month, day, year order.
- 7) MU ID#: Please type the employee's current MU ID#.
- 8) Work Telephone: If known, please type the full work telephone number in this space. MURC may need to contact the employee regarding questions.
- 9) Location: Please type the department and/or college of the employee in this space.
- 10) E-Mail: Please type the employee's email address. MURC needs the email address that the employee regularly uses, not necessarily the MU email address. This is needed for correspondence.

- 11) MU Undergraduate – MU Graduate – Non-Student: Please check one of these boxes. If the employee is a CURRENTLY enrolled as a MU Undergraduate or Graduate please check the appropriate box. If the employee is a non-student, please check this box.
- 12) Title of Position – New: Please type in title of position. If a new position, please do not complete “Old” position title. This title needs to be listed as the positions are listed in the agency approved budget.
- 13) Title of Position – Old: Please type in the old title of position. IF the position is staying the same, please type the same title in both fields.
- 14) WAGE: NEW: Please type in the agency approved wage for the position above. Please select Yearly, Period, Lump Sum, or Hourly from the drop down list. Yearly means a yearly salary. Period means this wage per period (i.e. 1 pay period). Lump Sum means the wage is set for the specific period listed in the “Effective Date”. Hourly means an hourly wage.
- 15) Remarks: Please type in any remarks that the originator believes is necessary for MURC to process the PAR.
- 16) Effective Date: Please type in the effective dates of the PAR. Please type in BOTH a beginning and an end date. Please check your award. PAR’s cannot begin prior to the approved beginning date of an award and CANNOT go past the approved end date of an award.
- 17) Action: Please check one that applies. For Cell Phone Stipends, please check the “Other” box and type in “Cell phone stipend”.
- 18) Employment Type: Please check one that applies. Definitions are available in the MURC Employee Handbook. <http://www.hr-serv.net/policies/MURC-HR-3.pdf>
- 19) Miscellaneous Changes: Please check ALL that apply.
- 20) New Employees: Please check if the required I-9 and W-4 forms are completed and attached. These forms and the Drug-Free Workplace form can be found at: <http://www.hr-serv.net/forms/USCIS-I-9-053105.pdf> <http://www.hr-serv.net/forms/W-4-FORM.pdf> <http://www.hr-serv.net/forms/Drug-Free-Workplace-Form-1.doc> *The employee is responsible for contacting MURC to complete forms if completed forms are not attached to the PAR.*
- 21) Mail Paycheck: Please check EITHER home address OR Campus Dept. If Campus Dept. is checked, please type in the correct campus dept. to send check to.
- 22) APPROVAL: Please type Name of Department or Unit Supervisor and Project Director/Principal Investigator in the designated section on the correct lines. These individuals will need to sign the PAR IN BLUE INK and put in date signed.
- 23) Department Contact Person: Please type in the name and phone number of the department contact in case MURC has questions regarding the PAR. Please DO NOT SUBMIT PAR to MURC without this information. This is EXTREMELY IMPORTANT. MURC has to have a contact in case of questions regarding the PAR.

24) **EMPLOYEE SIGNATURE:** This is VERY IMPORTANT. Please have the employee sign the form IN BLUE INK. It is necessary for the employee to verify all information on the PAR prior to signature. It is required that the employee sign their PAR EVERY TIME A NEW PAR IS SUBMITTED TO MURC.

Once the PAR form is completed with all required signatures, the PAR needs to be sent to MURC.

SIGNATURES IN BLUE INK: Please sign the original PAR in blue ink or other distinctly non-black ink. This will allow MURC to distinguish the original from copies.

IMPORTANT NOTE ON SAVING PARs: Adobe forms will not ordinarily save on the user's computer and preserve content the user has typed in. Re-opening the saved document will usually reveal that all the fields are empty. *Avoid this difficulty!* This form is designed to be filled out on-screen and then printed immediately without attempting to save it. The paper printout should be preserved as the originator's copy.

COPIES: Originators and those who review/approve PAR's after the originator submits the form should make copies for themselves as necessary. After an originator completes a PAR, he/she should make a copy for themselves.

CHANGES AND CORRECTIONS: Occasionally it is necessary to change some element of a PAR. A variety of changes may be necessary. These may include changes to funding sources, salary amounts, effective dates, etc. WHEN A CHANGE IS MADE IN A PRINTED PAR BY A HIGHER-LEVEL APPROVER, THAT PERSON SHOULD INITIAL ANY CHANGES MADE, MAKE A COPY WITH THE CHANGES CLEARLY HIGHLIGHTED, AND SEND IT BACK TO THE ORIGINATOR AND ANY INTERVENING APPROVERS IN THE ADMINISTRATION. THE ORIGINATOR IS RESPONSIBLE FOR PROVIDING A COPY OF THE CHANGED PAR TO THE PRINCIPAL INVESTIGATOR/ PROJECT DIRECTOR OR DEAN AS APPROPRIATE.

DISAPPROVED PARs: The same model listed above applies when a PAR is disapproved. A copy should go back to the originator and intervening administrative offices clearly marked with the reason the PAR is disapproved. If appropriate, the originator may create a substitute PAR if the problem can be resolved through research and changes from the original PAR.

FINAL DISPOSITION OF PARs: IT IS ASSUMED THAT IF A PAR WAS PROCESSED CORRECTLY, ON TIME, AND DID NOT SUSTAIN CHANGES OR WAS NOT DISAPPROVED, IT WAS PROCESSED AS THE ORIGINATOR TENDERED IT. ORIGINATORS WILL NOT RECEIVE A COPY OF PROCESSED PARs THAT WERE NOT CHANGED.