

How to Complete a Leave Status Position and Personnel Action (PPA) Form

Section I Reason for Action:

- Please select from the drop down.
- Choose a leave type from the drop down. Place a check mark if the leave status is w/Benefits or w/o Benefits.
- Enter the employee's last day worked and enter the leave status effective date and end date. If the end date is unknown, select TBD (To be Determined) from the "Other" drop down.

Section II Employee Information:

- Enter the employee's information.
- Next, top row only, enter the employee's current information.

Section III Salary and Source of Funds (Optional):

- Enter the employee's current salary in the Current Amount field and source of funds.

Section IV (Optional):

- Enter comments.

[Save and upload the PPA to Adobe Sign.](#)

Section V:

Approval Routing:

- Immediate Supervisor (**Employee Relations action only**)
- Employee Relations Manager (**Employee Relations only**)
- Classification and Compensation Manager (Sheila Wright Zeigler-**if applicable**)
- Time/Leave Coordinator (Theressa Graham)
- Benefits Service Center
- HRIS Specialist (Sharon Soles)

See example on the next page.

Position and Personnel Action Form
Leave Status



SECTION I REASON FOR ACTION	FMLA <input type="checkbox"/>		LEAVE W/O PAY <input type="checkbox"/>		<input checked="" type="checkbox"/> w/ Benefits	<input type="checkbox"/> w/o Benefits
	Last Day Worked: 09/30/2024	Effective Date: 10/07/2024	End Date:			
			TO BE DETERMINED <input type="checkbox"/>			
SECTION II EMPLOYEE INFORMATION	830XXXXXX		Jane		Doe	
	Banner ID	First Name	Middle Name	Last Name		
	Current Position Title/Rank	Banner Position # (6-digits)	Supervisor/Position #	Dept./College/School		
	Admin Assist	777777	John Smith/000000	Registrar		
	Requested Position Title/Rank	Banner Position # (6-digits)	Supervisor/Position #	Dept./College/School		
SECTION III Salary and Source of Funds (Optional)	Current Amount:		Recommended Amount:			
	Fund	Org	Account	Program		
	Fund	Org	Account	Program		
	Fund	Org	Account	Program		
SECTION IV COMMENTS						
SECTION V APPROVAL	Approval Routing		Signature/Date			
	Immediate Supervisor or Department Chair		Signature required (Employee Relations Action Only)			
	Employee Relations Manager		Employee Relations Actions Only			
	Classification & Compensation Manager		Sheila Wright Zeigler			
	Time/Leave Coordinator		Theressa Graham			
	Benefits Service Center		Signature required			
	HRIS Specialist		Sharon Soles			