CHICAGO STATE UNIVERSITY

Office of Human Resources (OHR)
ADM 203 | Ph: 773.995.2040 |Fax: 773.995.2569 |
HR@CSU.edu

Personnel Change Notice Instructions

This form must be used when making job or personal data changes for current employees.

MANAGERS are responsible for obtaining approvals and submitting a Personnel Change Notice (PCN) for all job-related data changes. Completed PCNs can be dropped off in the Office of Human Resources (OHR), ADM-203.

	INSTRUCTIONS	

Section 1:

It is not necessary to complete all fields. Only information that is being changed should be completed. However, if completing information in the CHANGE TO section, then corresponding information in the CURRENT section must also be completed.

1. Description of items in Section 1:
   - **Employee Classification:** Indicate **-** Administration; Faculty; Civil Service; Graduate Assistants; Non- Student Tutors; Extra Help; Temporary Administrator
   - **Class Code**: Manager should complete information in the current section. The *"Change To"* code will be assigned by the Classification Officer.
   - **Job Reason**: Career Development, Desk Audit, Demotion, Lateral Transfer, Promotion, Reclassification, Reassignment
   - **Job Title**: Indicate "Current" and "Change To" title, if applicable.
   - **Position Control / CS Number**: The "Current" number can be found on the employee's Hiring Proposal; The "Change To" number will be assigned by the Office of Human Resources.
   - **Salary Class**: Exempt, Non-Exempt
   - **Rate of Pay**: Hourly and Monthly rates are required
   - **Salary Reason**: Adjustment, Demotion, Merit, Probationary Increase, Promotion, Reassignment
   - **Part-Time Weekly Commitment Hours**: For Temporary Administrators, Non-Student Tutors or Extra Help, indicate the total number of hours the employee will be working.

2. All Personnel Change actions require an effective date in the "Change To" section.

Section 2:

1. The employee completing the form must provide their full name and phone number in the "Completed By" section.

2. Print and obtain appropriate signatures before returning to OHR for processing.
   - Any changes to salary **must include** signatures from Fiscal Officer; President; Vice President; Director of Budget and the Chief Culture & Talent Officer
   - The President's signature **is not** required for non-salary changes and/or lateral transfers.

Signature Workflow Before Processing:

1. Fiscal Officer
2. Vice President (If Applicable)
3. President (Signature required for non-negotiated or prevailing wage salary increases and promotions)
4. Human Resources Classification Officer
5. Chief Culture & Talent Officer
6. Sponsored Programs (If Applicable)
7. Director of Budget

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Personnel Change Notice

EMPLOYEE INFORMATION			
EMPLOYEE'S NAME (Last, First, M.I.)	UNIVERSITY ID (UID)	ACCOUNT NUMBER	
CAMPUS PHONE	CAMPUS BUILDING	FLOOR /Room Number	CAMPUS EMAIL ADDRESS

Complete the below based only on information that is changing. When new information is entered in the "CHANGE TO" area, corresponding information must be included in the "CURRENT" area. For example: if a job classification and class codes change, then both the current and new job classification and class codes must be reflected below.

SECTION 1

CURRENT			CHANGE TO		
Employee Classification			Employee Classification		STATUS EFFECTIVE DATE
ACCOUNT/DEPARTMENT NAME	ACCOUNT NUMBER		ACCOUNT/DEPARTMENT NAME		ACCOUNT NUMBER
POSITION CONTROL / CS NUMBER:	ORG CODE:		POSITION CONTROL / CS NUMBER:		ORG CODE:
CLASS CODE	JOB REASON		CLASS CODE		JOB REASON
JOB TITLE	JOB START DATE	JOB END DATE	JOB TITLE	JOB START DATE	JOB END DATE
SALARY CLASS	RATE OF PAY Hourly: Monthly: Annual:		SALARY CLASS	RATE OF PAY Hourly: Monthly: Annual:	
LOCAL AFFILIATION	Comments:		LOCAL AFFILIATION	Comments:	
SALARY REASON	SALARY EFF. DATE		SALARY REASON	SALARY EFF. DATE	
PART-TIME WEEKLY COMMITMENT HOURS	EFF. DATE	END DATE	PART-TIME WEEKLY COMMITMENT HOURS	EFF. DATE	END DATE

SECTION 2

FORM COMPLETED BY	**PHONE NUMBER (include area code)**	**DATE**

APPROVAL SIGNATURES

FISCAL OFFICER	**DATE**	**PRESIDENT**	**DATE**
CHIEF CULTURE & TALENT OFFICER	**DATE**	**VICE PRESIDENT**	**DATE**
DIRECTOR OF BUDGET	**DATE**	**SPONSORED PROGRAMS (if applicable)**	**DATE**

OHR USE ONLY

CLASSIFICATION OFFICER	JOB DESCRIPTION PROVIDED	PAA EXEMPTION
TALENT MANAGEMENT SOFTWARE UPDATE Date of Completion:	BANNER UPDATE Date of Completion:	