Affected Employees:

Name:	EmplID:	Hire Date:
Check all that apply:		
Probationary Status:	Temporary:	Time Limited:
Trial Status:	Intermittent:	Undergrad Student:
Grant:	Grad Student:	-
Classification: Classified:	Unclassified:	Faculty: 🔲
Is this a disciplinary reason? Y \square N \square		
Justification for Action: (Please attach additional justification	on sheet as needed)	
HR Approval:		Date:
Name:	EmplID:	Hire Date:
Check all that apply:	,	
Probationary Status:	Temporary:	Time Limited:
Trial Status:	Intermittent:	Undergrad Student:
Grant:	Grad Student:	<u> </u>
Classification: Classified:	Unclassified:	Faculty:
Is this a disciplinary reason? Y N		, <u> </u>
Justification for Action: (Please attach additional justification	on sheet as needed)	
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HR Approval:		Date:
Name:	EmplID:	Hire Date:
Check all that apply:		Time Bate.
Probationary Status:	Temporary:	Time Limited:
Trial Status:	Intermittent:	Undergrad Student:
Grant:	Grad Student:	onacigiaa staaciii.
Classification: Classified:	Unclassified:	Faculty:
Is this a disciplinary reason? Y N	Official Sifica.	racarty.
Justification for Action: (Please attach additional justification sheet as needed)		
JUSTINICATION TO ACTION (Frease attach auditional justinication	on sheet as needed)	
HR Approval:		Date: