

Department Table Additions and Change Form

College/Location: _____ Eff. Date of Change: _____
(beginning of a pay period)

INACTIVATE	<p>INACTIVATE</p> <p>DEPARTMENT ID: _____ (xxx-xxxxxx) <i>(dept. must not have any employees in it)</i></p> <p style="text-align: right;">Is Dept Obsolete? Y or N Any employees in Dept? Y or N</p>																					
ADD NEW DEPARTMENT	<p>NEW DEPARTMENT ID: _____ (xxx-xxxxxx)</p> <p>Supervisor Position Number: _____ Supervisor Name: _____</p> <p>Supervisor Employee ID #: _____ Reports To: _____ (Dept. ID)</p> <p>Department Description: _____ <small>(30 characters Max - i.e.: Business & information Technol) - spaces included</small></p> <p>Short Description: _____ <small>(10 Characters Max - i.e.: Bus & Tech) - spaces included</small></p> <p>Payroll Account #: _____ (Fund/Unit/Charge Center) <small>(Note: If the account # is a new account, attach the "New Account Worksheet" that was submitted to Business Services)</small></p>																					
CHANGE EXISTING DATA	<p>CHANGES TO EXISTING DEPARTMENT ID DATA : _____ (xxx-xxxxxx)</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;"></th> <th style="text-align: center; font-style: italic;">change to</th> <th style="width: 50%;"></th> </tr> <tr> <th style="text-align: center;"><u>Current</u></th> <th style="text-align: center;">to</th> <th style="text-align: center;"><u>New</u></th> </tr> </thead> <tbody> <tr> <td>Depart Name: _____</td> <td style="text-align: center;">➔</td> <td>_____</td> </tr> <tr> <td>Supervisor Position #: _____</td> <td style="text-align: center;">➔</td> <td>_____</td> </tr> <tr> <td>Supervisor Name: _____</td> <td style="text-align: center;">➔</td> <td>_____</td> </tr> <tr> <td>Supervisor Employee ID #: _____</td> <td style="text-align: center;">➔</td> <td>_____</td> </tr> <tr> <td>Dept. Reports To: _____ (Dept. ID #)</td> <td style="text-align: center;">➔</td> <td>_____ (Dept. ID #)</td> </tr> </tbody> </table>		change to		<u>Current</u>	to	<u>New</u>	Depart Name: _____	➔	_____	Supervisor Position #: _____	➔	_____	Supervisor Name: _____	➔	_____	Supervisor Employee ID #: _____	➔	_____	Dept. Reports To: _____ (Dept. ID #)	➔	_____ (Dept. ID #)
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APPROVALS NEEDED:

Department Manager: _____ Date

Business Services Office: _____ Date

College/District Office HR Rep: _____ Date

(Note: PAR's that needs processing for staff effected by this change must be submitted with this Dept. Table Change Form.)