

THE UNIVERSITY OF NORTH CAROLINA AT GREENSBORO
EPA PERSONNEL ACTION FORM



ID # 2636

Date March 10, 2005

- 1. Social Security No. 789-10-1112
- 2. Name: Ms. Starbucks, Nancy B.
- 3. Address: 1921 Ridgeway Drive
Greensboro, NC 27402
Country: U.S.A.
- 5. Building: 233 Room # 100
Campus Phone: 334-5241
- 6. Benefits
Increase Recommender: 339
Timekeeper Location: 339
Check Dist. Code: 339
- 7. I-9 Certification Needed
I-9 Certification Date: _____
- 8. Student
- 9. Teaching Position
- 10. AAO Forms Complete
- 11. Credentials Verified
- 12. U.S. Citizen Type Visa: _____

4. Division: 01 Unit: 22
Dept No.: 339
Dept. Name: **BROADCASTING/CINEMA**

14. Employee's Salary to be paid from sources as follows

Posn #	Sources (Budget Subhead)	Amount	FTE
4023	2 - 01339 - 1310	\$ 28,000.00	1.

Totals-- Amount: \$ 28,000.00
FTE: 1.00

15. Plus Salary Increase:

13. Comments:

Appoint as FT Lecturer on a permanent line for a one-year term, effective 08/01/05-05/15/06. AA2 approved 5/28/05.

1 NEW APPOINTMENT REAPPOINTMENT Promotion
CHANGE IN: FUNDING RANK SALARY TITLE

Effective Date: 08/01/2005 Work End Date: 05/15/2006
Number of months worked: 9 Number of instalments: 12
Rank Recommended: Full Time Lecturer
 This is a Graduate Assistant
EPA Nonfaculty annual leave allowance recommended (if appropriate): _____ days
Replacement for faculty on research assignment/leave: _____

4 SEPARATION, REMOVAL FROM PAYROLL Effective Date: 07/31/2006

Rank Lecturer
Separation Reason Appointment Completed Other _____
Reason for resignation _____

CHANCELLOR	VICE CHANCELLOR	GRAD. SCHOOL (Student only)	DEAN/DIRECTOR	DEPARTMENT HEAD	BUDGET OFFICE
Approval	Approval	Approval	Approval	Approval	Approval
Date	Date	Date	Date	Date	Date