

THE UNIVERSITY OF NORTH CAROLINA AT GREENSBORO
EPA PERSONNEL ACTION FORM



ID # 2653

Date March 10, 2005

1. Social Security No. 345-67-8910
2. Name: Dr. Howell, Howard H.
3. Address: 629 Westhaven Rd.
Archdale, NC 27263

4. Division: 01 Unit: 22
Dept No.: 289
Dept. Name: RELIGIOUS STUDIES

Country: U.S.A.
5. Building: 44 Room # 100
Campus Phone: 334-5241

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

6. Benefits
Increase Recommender: 289
Timekeeper Location: 289
Check Dist. Code: 289

Posn #	Sources (Budget Subhead)	Amount	FTE
<u>8899</u>	<u>2 - 01289 - 1310</u>	<u>\$ 68,000.00</u>	<u>1.</u>

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: _____

Totals-- Amount: \$ 68,000.00
FTE: 1.00

15 Plus Salary Increase:

13. Comments:

Promote to Associate Professor with Tenure effective 08/01/2005.

1

<input type="checkbox"/> NEW APPOINTMENT	<input type="checkbox"/> REAPPOINTMENT	<input checked="" type="checkbox"/> Promotion
CHANGE IN: <input type="checkbox"/> FUNDING	<input checked="" type="checkbox"/> RANK	<input type="checkbox"/> SALARY <input type="checkbox"/> TITLE

Effective Date: 08/01/2005

Work End Date: _____

Number of months worked: 9

Number of installments 12

Rank Recommended: Associate Professor with Tenure

This is a Graduate Assistant

EPA Nonfaculty annual leave allowance recommended (if appropriate)

_____ days

Replacement for faculty on research assignment/leave: _____

2
3

4

SEPARATION, REMOVAL FROM PAYROLL Effective Date: _____
--

Rank _____
Separation Reason _____ Other Ongoing/tenured
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