

Department Approval Form (DAF)

The University of Texas at San Antonio

Interim Process

Current Date

Requested Effective Date

TYPE OF REQUEST

- Hire
 Rehire
 Faculty Contract
 New Position
 Modify Position
 Pay Rate Change
 Job Record Change

EMPLOYEE INFORMATION

Employee Name

EMPL ID

DEPARTMENT INFORMATION

Department Name

Dept ID

Department Contact

Dept Phone No.

POSITION INFORMATION / CHANGE

Current Job Code

Current Job Title

Position Number

Current Hrs Per Wk

Current FTE

Req Hrs/ FTE

Requested Job Code

Requested Job Title

Benefits Eligible

Yes

No

Duration

Less than 134 Days

135 Days or More

Reports to Position No.

Reports To Name

JOB RECORD CHANGE - choose one

Termination
(leaving UTSA)

(Last Date of Employment)

Retirement

(Date of Retirement)

End Date

PAY RATE CHANGE

Pay Rate

Increase Amount

Requested/New Pay Rate

Description of Requested Action/Comments

Example: Creating new position for department. Needed to complete required office workload. If retroactive request please justify.

APPROVALS

Please route internally as required per department, prior to attaching to SharePoint form for routing to HR. (Add additional lines as necessary)

X

Department Approver (Required)

Print Name/Title

Date:

X

Other Approver (As Necessary)

Print Name/Title

Date:

X

VP Approver/Provost/Dean

Print Name/Title

Date:

(Only required for Staff/Faculty positions)