



New Mexico State University
Human Resource Services
Personnel Action Form (PAF)

ROUTING
Click [Here](#) to submit PAF. Copy text below into PAF Submission Form.

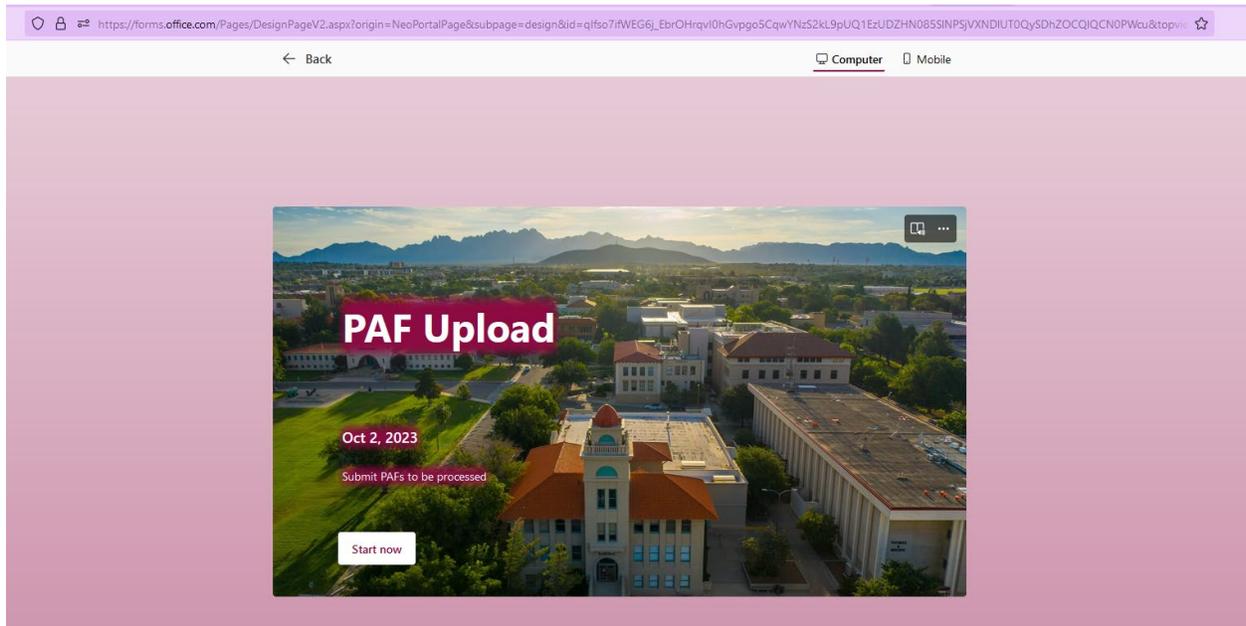
1 1 1 1 1 1

Section: 1		REQUESTOR INFORMATION	
Requestor Name:	Email:	Phone:	PAF Code: <input type="text"/>
Section: 2		EMPLOYEE INFORMATION	
Employee ID: _____	Employee Name (Last, First, MI): _____		
Position#: _____	Suffix: _____	ECLS: _____	Org: <input type="text"/>
Section: 3		STATUS CHANGE (Do not complete Section 3)	
<i>Term of Employment</i>			
Last Day: _____	Term Code: _____	<input type="text"/>	Term Reason: _____
<i>Leave of Absence</i>			
Leave Status: _____	Leave Type: _____		
Effective Date (Actual Start or Return Date): _____	Expected Return Date: _____		
Section: 4		JOB CHANGE INFORMATION (Only complete fields to be changed)	
Effective Date: _____	Change Code: <input type="text"/>		
Job Start Date: _____	Differential Amount: _____	Salary/Hourly Rate: _____	
Job Stop Date: _____	Department Org#: _____		
Title: _____	Reports to Position#: _____		
FTE: _____	Time Sheet Org: _____		
Default Shift: <input type="checkbox"/> Day <input type="checkbox"/> Swing <input type="checkbox"/> Graveyard			
Section: 5		REASON FOR CHANGE/COMMENTS	
Section: 6 (Must be completed)		APPROVAL	
<i>Required for Faculty: Dept Head/Dir, VP/Dean/CC President and HR Services • Required for Staff/Students: VP/Dean/CC President and HR Services</i>			
Dept Head/Dir (optional): <input type="checkbox"/> Authority <input type="checkbox"/> Designee	Print	Date	
VP/Dean/CC President: <input type="checkbox"/> Authority <input type="checkbox"/> Designee	Print	Date	
HR Services	Print	Date	
Internal Use Only			
_____ Data	_____ Payroll	_____ Pay Event	_____ Adjustment
_____ Budget			

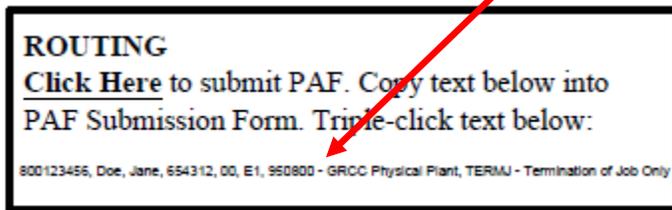
[Reset Form](#) [Print Form](#)

1. Complete Personnel Action Form (PAF) and save in preparation to submit (upload). As with current process, this includes combining supporting documents to the PAF.

2. In "ROUTING" Box, follow the "Click Here" link to the new PAF Submission Form



3. Triple click the long small string of text, copy (CTRL + C), and then paste (CTRL + V) the text into field titled "Text from PAF "ROUTING" Box



1. Text from PAF "ROUTING" box:



Example: "800123456, Test, Test T, 123456, 00, E1, 331600 - Psychology, TERME- Termination of NMSU Employment"

800123456, Doe, Jane, 654312, 00, E1, 950800 - GRCC Physical Plant, TERMJ - Termination of Job Onl

4. "Upload" and attach the PAF. Naming of the file should be as follows "800XXXXXX_LastName_FirstInitial_" additional information can be added after the employee's first initial.

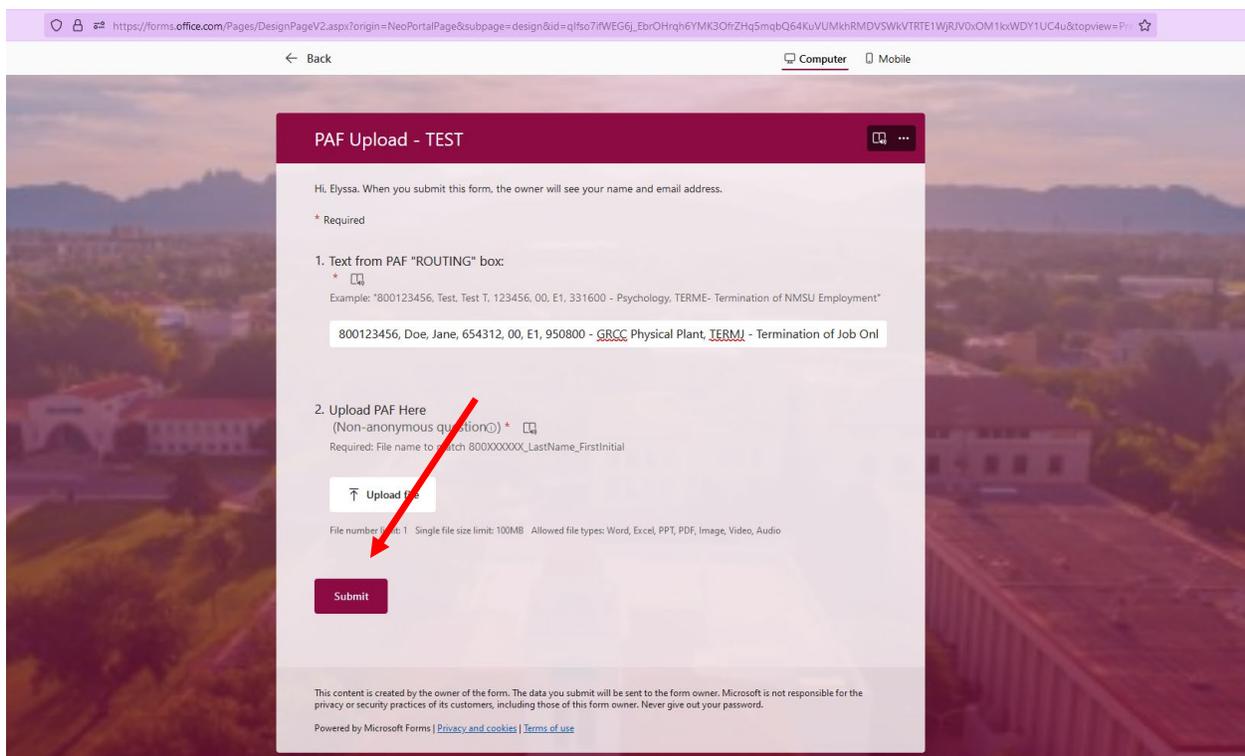
2. Upload PAF Here

(Non-anonymous question) * 

Required: File name to match 800XXXXXX_LastName_FirstInitial

 Upload file

5. Click "Submit"



PAF Upload - TEST

Hi, Elyssa. When you submit this form, the owner will see your name and email address.

* Required

1. Text from PAF "ROUTING" box:
* 
Example: *800123456, Test, Test T, 123456, 00, E1, 331600 - Psychology, TERME- Termination of NMSU Employment*

800123456, Doe, Jane, 654312, 00, E1, 950800 - GRCC Physical Plant, TERMJ - Termination of Job Onl

2. Upload PAF Here
(Non-anonymous question) * 
Required: File name to match 800XXXXXX_LastName_FirstInitial

 Upload file

File number: 1 Single file size limit: 100MB Allowed file types: Word, Excel, PPT, PDF, Image, Video, Audio

Submit

This content is created by the owner of the form. The data you submit will be sent to the form owner. Microsoft is not responsible for the privacy or security practices of its customers, including those of this form owner. Never give out your password.

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Once the PAF has been submitted, it is sent to the Employment & Comp team for processing as per current process.