Adjunct Faculty/Credit Courses

PERSONNEL ACTION FORM

Use this form for adjuncts (non LCSC employees) teaching courses for credit
Use Temporary and Adjunct/Non-Credit PA for temporary employees and adjuncts (non LCSC employees) teaching non-credit courses
Use PA for employees with PCNs receiving Payment in Addition

Name

SSN XXX-XX-

Today's Date

Address

Effective Dates
Begin Date
End Date

☐ Replacement PA - Original Dated _____
☐ Termination - Last Day Worked _____

Complete separate form for each semester

1. PCN	☐ 9999 (w/o benefits) ☐ 9777 (w/benefits)
2. Title	Adjunct
3. Division	
4. Base Salary	
5. Health Benefits	Yes ☐ No ☐
health benefits only if teaching 24 cr/year	
6. Budget Code/%	___-___-_____ ____ %
Budget Code/%	___-___-_____ ____ %
Budget Code/%	___-___-_____ ____ %
Budget Code/%	___-___-_____ ____ %

FOR HUMAN RESOURCE SERVICES USE ONLY			
Old Rate		Old PCN	
New Rate		New PCN	

Pay Period		Pay Date	Type of Time	Hours/ Payment

Semester

Subject	Course	Section	Cr.	$/Credit	Replacement
		Total Credits			

7. Comments:

8. Payment Schedule

Adjunct Funding	
Salary	
Fringe	
Total	

Replacement Cost (charged to a salary line)			
PCN	Name	Reason	Cr

Salary	
Fringe	
Total	

Replacement Cost (charged to a salary line)			
PCN	Name	Reason	Cr

Salary	
Fringe	
Total	

Routing/Approval

Coordinator	Dept. Head/Director	Grant Monitor (if grant funded)	Dean	Budget Office	Human Resources

Originator: _____