

EASTERN MICHIGAN UNIVERSITY
POSITION CONTROL ACTION FORM- STAFF

PCA No. _____

Effective Date: _____

End Date: _____

Action Proposed: New Freeze Account Change Reclassify Title Change
 Eliminate Extend FTE Change Other _____

Complete all items that are shaded. Budget or HR Office will complete other items if unknown. If changing attributes on an existing position, write new information next to the current field information.

POSN_STATUS	<input type="text"/>			
POSITION_KEY	<input type="text"/>			
POSN_TITLE	<input type="text"/>			PCLS_CODE <input type="text"/>
NTRPCLS_ECLS_CODE	<input type="text"/>	NTRPCLS_GRADE <input type="text"/>	<input type="text"/>	
NTRPCLS_ESKL_CODE	<input type="text"/>	NTRPCLS_PGRP_COD <input type="text"/>	NTRPCLS_EXEMPT_IN <input type="checkbox"/>	<input type="text"/>
FTVORGN_TITLE	<input type="text"/>			DIVISION CODE <input type="text"/>
	1	2	3	4
FUND_CODE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ORGN_CODE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ACCT_CODE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PROG_CODE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PERCENT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
BUDGET	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
BDGT_APPT_PCT TOTA	<input type="text"/>	Appt period: Annual ____ or Less Than Annual ____	NBBPOSN POSN REPORT <input type="text"/>	<input type="text"/>
POSN_BUDGET_BASIS	<input type="text"/>	Start Date _____	If position # of reports to supervisor is unknown, please indicate name of administrative supervisor:	
POSN_ANNUAL_BASIS	<input type="text"/>	End Date _____	<input type="text"/>	
BUDGETED_TOT_AMT	<input type="text"/>		<input type="text"/>	

Reason for position change: (Attach additional documentation if needed.)

Indicate budget impact and funding source: (Attach additional documentation if needed.)

Account Manager: _____ Phone: _____ Date: _____
Dean/Director : _____ Phone: _____ Date: _____
Division Budget : _____ Phone: _____ Date: _____
Vice President : _____ Phone: _____ Date: _____

Budget Management: _____ Phone: 7-3225 Date: _____
Human Resources: _____ Phone: 7-2275 Date: _____
Executive Authorization: _____ Phone: _____ Date: _____

**POSITION CONTROL ACTION FORM (PCA)-STAFF
INSTRUCTIONS AND ROUTING SEQUENCE:**

To initiate any staff position change (new, modified, reclassify, title change, etc) a current PCA form should be requested from either the Budget Management Office (7-3225) or Human Resources-Compensation Programs (7-2275). The PCA document is now system generated upon demand with pre-printed information regarding current position attributes.

NEW, ACCOUNT CHANGE, EXTEND END DATE, FTE CHANGE (APPT % OR APPT PERIOD), ELIMINATION:

Materials that need to accompany the Position Control Form document are:

All new position requests must be accompanied by a completed Position Review Form (from Human Resources-Compensation Programs) to receive Budget Management review and authorization.

A DETAILED NARRATIVE STATEMENT outlining the need for the position or the modification and any relevant background such as prior review and endorsements by established committees, task groups, project teams, etc..

The FISCAL IMPACT of the new position or change must be addressed. This means identifying the funding source for the position. Any required reallocations or conversions of existing staff position, FTEs, etc. should be included if applicable. This includes conversion of non-personnel service funds in support of the new position, and the impact on the current and next fiscal year. If cost issues involve the next fiscal year, a Base Budget Development Form (TC029) should be included. If cost issues involve the current fiscal year, a Budget Transfer Form (TC022) should be included.

Requests for new or modified designated fund supported positions must be accompanied by an annual operating budget identifying both revenue and planned expenditures. Requests for new or modified grant fund supported positions must be accompanied by a Board approved ORD Transmittal Form.

The narrative statement and fiscal impact explanation must be reviewed and receive WRITTEN AUTHORIZATION by the Divisional Vice President prior to submission to or approval by Budget Management.

Signature Routing:

Secure signature of Account Manager, Dean/Director, Divisional Budget Administrator and Vice President and route to the University Budget Management Office at 306 McKenny.

Final Executive Authorization:

All new and modified position requests are subject to final authorization by the Vice President Business and Finance prior to implementation unless otherwise already approved as part of the regular budget planning/approval process for that fiscal year or is a grant funded position with signature approval from the Grant Accounting Office. (Note: A PCA form will still need to be initiated to actually implement creation/hiring of a new or modified position with prior Board approved budget authorization but will receive final authorization by the Executive Director, Human Resources.) Position eliminations will receive final executive authorization from the Executive Director, Human Resources.

RECLASSIFICATION AND TITLE CHANGES:

Materials that need to accompany the Position Control Form document are:

All reclassification requests must be accompanied by a completed Position Review Request Form with requested support documentation. An organization chart for the department and revised classification specification with the necessary change in title, essential duties and qualification statements noted is normally a part of the necessary support documentation.

Signature Routing:

Secure signature of Account Manager, Dean/Director, Divisional Budget Administrator and Vice President and route to Human Resources-Compensation Programs at 235 Warner. Upon completion of a position classification audit the Compensation Programs Office will secure final Executive Authorization and forward to the Budget Office at 306 McKenny.

Final Executive Authorization:

All Administrative/Professional (AP) reclassifications to a level of Mgt 3 or above are subject to final authorization by the Vice President, Business and Finance, upon recommendation from the Executive Director, Human Resources.

All other reclassifications (AP Mgt 2 and below, PT, CC, CS or FM) are subject to final authorization by the Executive Director, Human Resources, upon recommendation from the Director, Compensation Programs.

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