

HOW TO SUBMIT A PAF IN DOCUSIGN

Items needed before you begin:

- ✓ Completed [CONCURRENT EMPLOYMENT INFORMATION](#) form

NOTE: DocuSign will not submit the PAF without the completed Concurrent Employment Form attached.
Does not apply to Leave of Absence and Termination PAFs

- ✓ Employee Name and email address
- ✓ Human Resources webpage:
<https://uca.edu/hr/personnel-action-form-paf/>

UNIVERSITY OF CENTRAL ARKANSAS
CONCURRENT EMPLOYMENT INFORMATION

This form must be completed by the employee and attached to each PAF requesting appointment or change.

NAME EMPLOYEE ID #

CAUTION: Under Arkansas Code 6-63-307 (b) Any employee knowingly violating the provisions of this section shall be subject to immediate termination and shall be barred from employment by any agency or institution of the State of Arkansas for a period of not less than three (3) years or until such employee shall repay to the State of Arkansas any sums received by such employee in violation of this section, together with interest at a rate of ten percent (10%) per annum.

Will you be employed during the period of this PAF in any other roles or assignments with UCA or with other State Agencies or Institutions? Including additional teaching assignments, part-time work and temporary project assignments.

☐ NO *If no, please provide signature and date here:*
SIGNATURE _____ DATE _____
If NO, THIS FORM IS COMPLETE AND READY TO SUBMIT WITH PAF.

OR _____

☐ YES **If yes, please provide specific information and signatures below.*
Please list your UCA work schedule as well as your CONCURRENT EMPLOYMENT schedule.
Briefly explain how the duties performed for secondary employer will not interfere with primary duties. Specify if you will take accrued leave, or work make-up time for any secondary hours worked that are in conflict with primary hours worked.

PRIMARY EMPLOYER		SECONDARY EMPLOYER	
*EMPLOYER		*EMPLOYER	
*EMPLOYMENT PERIOD		*EMPLOYMENT PERIOD	
*WORK DAYS		*WORK DAYS	
*WORK TIMES		*WORK TIMES	
*ASSIGNMENT SALARY		*ASSIGNMENT SALARY	
*EXPLANATION/ JUSTIFICATION		*EXPLANATION/ JUSTIFICATION	

I understand that concurrent employment must be approved by the Arkansas Department of Higher Education (ADHE) prior to my beginning employment.

*SIGNATURE _____ DATE _____

As Chair/Dean/Dept. Mgr., I acknowledge that I am aware that the above-mentioned person is employed elsewhere and that there is no conflict with the assigned work schedule at UCA.

*CHAIR/DEAN SIGNATURE _____ DATE _____

Revised 8/24/20

Accessing the PAF on the Human Resources website:

- ◆ Go to the PAF on the Human Resources website:
<https://uca.edu/hr/personnel-action-form-instructions/personnel-action-form-selection/>
- ◆ Answer the PAF selection questions in order to access the correct PAF template.

PAF Template Selection

Answer the following questions to determine the appropriate PAF template to complete.

Will this PAF need to be approved by the Provost?

- ☒ Yes
☐ No

Will any portion of the salary on this PAF be funded by a grant?

- ☐ Yes
☒ No

You will need to submit the [Academic PAF](#)

[Link to PAF](#)

ACADEMIC PAF — this PAF is to be used by ACADEMIC departments only.

ACADEMIC-GRANT PAF — this PAF is to be used by ACADEMIC departments only where any portion of the salary is funded by a GRANT.

NONACADEMIC PAF — this PAF is to be used by NON-ACADEMIC departments only.

NONACADEMIC-GRANT PAF — this PAF is to be used by NON-ACADEMIC departments only where any portion of the salary is funded by a GRANT

Academic Departments = departments that require Provost approval.

Non-Academic departments = departments that do not require Provost approval.

- ◆ Enter each requested recipients' name and email address

NOTE: When entering the Employee's name, you must provide their first AND last name.

PowerForm Signer Information

This PAF is for ACADEMIC departments' use only.
Fill in the name and email for each signing role listed below.
Signers will receive an email inviting them to sign this document.

Please enter your name and email to begin the signing process.

Department Contact

Your Name: *

Full Name

Your Email: *

Email Address

Please provide information for any other signers needed for this document.

Department Chair

Name:

Full Name

Email:

Email Address

Dean of College

Name:

Full Name

HOW TO SUBMIT A PAF IN DOCUSIGN

Completing the PAF:

- ◆ Provide the information needed for that particular employee. All required fields are outlined in red and must be filled in before the PAF will move forward to the next recipient. Fields outlined in grey are not required to be completed in order to submit the PAF; however, fill in the grey fields if they are applicable to the particular employee.
- ◆ Attach the **CONCURRENT EMPLOYMENT INFORMATION** form. You must attach it with the paperclip located on the top left corner of the PAF (does not apply to Leave of Absence or Termination PAFs)

MUST use this paperclip to attach the **CONCURRENT EMPLOYMENT INFORMATION**

Required fields are outlined in RED

Click SIGN for signature

Use this paperclip to attach optional documents to the PAF

DocuSign Envelope ID: B3FA3090-53A6-4318-B753-0CAAD4FC43A7

UNIVERSITY OF CENTRAL ALABAMA
PERSONNEL ACTION FORM (PAF)

SECTION 1 - EMPLOYEE DATA

LAST: George FIRST: Jim MI: B EMAIL ADDRESS: [redacted]

SECTION 2 - ACTION REQUIRED

☒ Re-Hire ☐ Change in Status/Revision ☐ Other ☐ New Hire

EMPLOYEE INFORMATION: ☐ Supervisor ☐ Benefits Eligible ☐ Appointment ☐ Extension

☐ Leave of Absence: From: _____ To: _____ SPECIFY THE REASON FOR LEAVE

☐ Termination: ☐ Resignation ☐ UCA Retirement* ☐ Other Last day of work: _____

*UCA Retirement is age 59 1/2 with at least 10 years of UCA benefit eligible service or any age with 25 years of service

SECTION 5 - EXPLANATION

Will be teaching one class in the fall.

DEPT CONTACT: [redacted]

PRIN INVEST (GRANTS): [redacted]

DEPT CHAIR: [redacted]

DEAN OF COLLEGE: [redacted]

GRAD SCHOOL: [redacted]

APPROVING OFFICER: [redacted]

GRANT OFFICE: [redacted]

BUDGET OFFICE: ☐ Yes ☐ No

PRESIDENT: ☐ Yes ☐ No

Required - Which state? Maryland

YES, this employee will be working remotely from a: ☒ Maryland

SECTION 6 - SIGNATURES

DocuSigned by: [Signature]

11/11/2020

VICE PRESIDENT

HUMAN RESOURCES

GRANT OFFICE

- ◆ Other Attachments may be added using the paperclip on the bottom left corner of the PAF. Examples of other attachments may include resignation letter, time sheet, budget transfer form, etc.

Note: DO NOT use this paperclip to attach the concurrent form. You must use the paperclip at the top of the PAF for the concurrent form!

Upload Attachment

UPLOAD A FILE

DONE

How to Attach Documents to the PAF:

- Click the appropriate paperclip
- Click **UPLOAD A FILE**
- Select the correct document and click **OPEN**
- Document should show with little green check mark
- Click **DONE**

You will see the file appear below the PAF

Upload Attachment

Jim Bob George - Concurrent Employment Info.pdf
1 page - Upload Complete

UPLOAD A FILE

DONE

HOW TO SUBMIT A PAF IN DOCUSIGN

Once you are done completing the PAF:

- ◆ Once you have completed the PAF and attached any and all necessary documents, click **FINISH**. There is a **FINISH** button at the bottom if you scroll past the PAF and any attached documents and there is another one at the top right part of the screen.

The screenshot shows the top of the PAF form. At the top, there is a blue bar with three buttons: **FINISH** (highlighted in yellow), **FINISH LATER**, and **OTHER ACTIONS**. Below this bar, there is a section for **STATUS** with various checkboxes and input fields for full-time, overload, part-time, tenure track position, salary, grade, and academic term.

- ◆ If you have forgotten to fill in some part of the PAF, you will not be able to finish until you do. The yellow **SELECT** arrow on the side will go to where you need to provide info and put red dots around the missing information.

The screenshot shows the main body of the PAF form. A yellow arrow labeled **SELECT** points to a red box on the left side of the form. The form itself is titled **PERSONNEL ACTION FORM (PAF)** and contains sections for **SECTION 1 - EMPLOYEE DATA** and **SECTION 2 - ACTION REQUIRED**. Red dashed boxes highlight missing information in the **SECTION 1** fields, such as **LAST**, **FIRST**, **MI**, **EMAIL ADDRESS**, and **UCA ID**.

- ◆ In the event that you get interrupted and cannot sign the PAF, select **FINISH LATER** up on the blue bar at the top. You will be asked to provide your email address so DocuSign can send you the link to the saved form.

The screenshot shows the top of the PAF form. The **FINISH LATER** button in the blue bar is circled in red, indicating it should be selected.

The screenshot shows a **Finish Later** dialog box. It prompts the user to enter their email address to receive a link to finish the document later. The email field contains **dbaker@uca.edu**. There are **SAVE & CLOSE** and **CANCEL** buttons at the bottom.

- ◆ After you have completed the PAF and clicked **FINISH**, you will be asked if you would like to Save a Copy of Your Document. You have the option to download or print it at this point; do what is best for your department. This is NOT the final approved PAF.

When the PAF is final and approved, you will receive a completed copy; you will receive an email notification with the subject line that says, "Completed: PAF: Employee Name". It is recommended to save the Final Approved PAF for your records.

You have now SUBMITTED an electronic PAF via DocuSign!

The screenshot shows a **Save a Copy of Your Document** dialog box. It features a large downward arrow icon and the text **Your document has been signed**. Below this, it says **If you would like a copy for your records, select Download or Print and save.** At the bottom, there are three buttons: **DOWNLOAD** (highlighted in yellow), **PRINT**, and **CLOSE**.