CASE WESTERN RESERVE
UNIVERSITY

PERSONNEL ACTION FORM (PAF)

EMPLOYEE DATA

CLASSIFICATION (check one)   ☐ Faculty   ☐ Staff   ☐ Post-Doctoral Scholar/Fellow   ☐ Research Scholars

Reason for Termination (check one)

Voluntary Termination	Involuntary Termination
☐ Resignation	☐ Layoff
☐ Retirement	☐ Death
☐ Completion of written notification of term of employment	☐ Termination for Cause/Dismissal
☐ Failure to report to work for 3 consecutive days without notice (*i.e.* no-call, no-show)	
☐ Failure to return from leave within the time allowed by the university leave policies	
☐ Declining an offer of employment while on inactive status	

NAME _____   EMPL. ID. # _____

DEPARTMENT _____   TITLE _____

TERMINATION DATE _____   LAST DAY WORKED _____   LAST DAY PAID _____

Is employee eligible for re-employment? _____   If no, identify reason: ☐ Failure to give/work two weeks' notice   ☐ See employee relations

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CONTACT INFORMATION

REASON FOR TERMINATION _____

ADDRESS (*if different from HCM*) _____

☐ **Check box** if employee is employed <u>outside state of Ohio</u>
Contact **oosemployment@case.edu**

VACATION PAYOUT (*Staff and PostDocs Only*)

Total Unused Vacation Hours _____

**Vacation balance in HCM does not reflect current accruals or deductions. Please review the Instructions.
Vacation Balance may be adjusted by the Payroll Office.**

SUPERVISOR CERTIFICATION

Supervisor/Designee _____ (*print name*) certifies that they will ensure completion of the
Termination Checklist and all applicable items are completed and/or returned by the employee.

AUTHORIZATIONS

EMPLOYEE SIGNATURE (*if available*) _____   DATE _____

PRINT AUTHORIZED REPRESENTATIVE NAME _____

AUTHORIZED REPRESENTATIVE SIGNATURE _____   DATE _____

HR RECORDS SIGNATURE _____   DATE _____

PLEASE SEE BACK OF FORM FOR INSTRUCTIONS

Last Rev'd 9.6.2024

1. Supervisor/HRA should review the university's <u>Termination of Employment Policy</u> and <u>Termination of Employment Procedure</u>.

2. Supervisor/HRA must complete the Personnel Action Form (PAF) for all employees terminating from the university. This includes certifying the <u>Termination Checklist</u> items were completed. **Employees who are transferring to another school or department within the university should not complete the PAF, but supervisors should still review the Termination Checklist to ensure all Department items are returned.**

3. Email a copy of this form with attachments (if applicable) to the HR Records Office at <u>hrrecords@case.edu</u> or drop off in person to Crawford Hall, Room 320.

4. If the required sections on the Personnel Action Form are not completed, including the Termination Checklist Certification by the supervisor or representative, the PAF will be returned to the supervisor/department/HRA to correct/complete and re-submit.

5. **If the terminating employee supervises other employees,** the HRA must contact HR Records by email at <u>HRRecords@case.edu</u> to update the supervisor identified in HCM.

INSTRUCTIONS FOR COMPLETING PAF

There are four sections to the PAF: (1) Employee Data; (2) Contact Information; (3) Vacation Payout; and (4) Authorizations. Not all sections are required.

1. **Employee Data Section (required)**
   - Termination date is the date to be entered in HCM as the final date of employment.
   - Last day worked is the last date the employee was physically at work and working.
   - Last day paid is the last day counted towards the amount paid (for example, an employee on paid sick leave who then terminates would have a later date paid than the last day worked).
   These dates will often, but not always, be the same date.
   - Attach Letter of Resignation, if available.
   - **If employee is not eligible for re-employment, you must have previously discussed and received approval from Employee Relations,** unless the reason is failure to give two weeks' notice.
     o Employees who do not give two weeks' notice are not eligible for rehire.

2. **Contact Information (optional)**
   - Reason for termination – list any additional reason for termination (i.e., new job, going to school, etc.) if desired.
   - If Home Address is HCM is not accurate, please contact HR Records by email at <u>HRRecords@case.edu</u> or update the PAF Form.
   - Check box if the employee works out of state. **Please refer to all supervisor requirements for hiring out-of-state employees and immediately contact the Payroll Office at <u>oosemployment@case.edu</u>.**

3. **Vacation Payout- Staff and PostDocs Only (required)**
   - Calculate the Total Unused Vacation Hours. **Vacation balance in HCM does not reflect current accruals or deductions.**
     o Total Unused Vacation Hours are calculated by viewing the hours listed in HCM, adding any vacation accrual the employee's final month (if the employee worked the 16th or later), and deducting any vacation taken in the final month or any overpayment due to the department submitting a PAF after payroll has run.
   PLEASE NOTE: If the vacation payout was improperly calculated by the supervisor/HRA, the Payroll Office will adjust the vacation payout. The Payroll Office's calculations of the vacation payout is the university's official calculation.

4. **Authorizations (required)**
   - If the employee is unable to sign the form, the supervisor/HRA should write "unavailable".
   - "Authorized Representative" is typically the direct supervisor. Where the direct supervisor is unavailable, it may also include the school/department HRA, HR Employee Relations Representative (in cases of a termination for cause/dismissal), Department Assistant, or other designee.

Final pay will be direct deposited to the bank account listed in HCM.
If you prefer a live check, you must contact the Records Office at <u>HRRecords@case.edu</u> prior to the <u>payroll run date</u>.
The check will be available on the next pay date in the Records Office, Crawford Hall, Room 220,
or can be mailed out the next business day following the pay date to the address on record in HCM.