

Case Western Reserve University School of Medicine  
Personal Data (pd) Salary Authorization

\_\_\_\_\_  
Prepared by

\_\_\_\_\_  
Approved by

**Empl ID (if already assigned)**

**User ID (if already assigned)**

**Action**

N-New  
C-Change  
D-Delete

**Last Name**

**First Name**

**Middle Name**

**Gender**

**Home Street Address**

**Apt. No.**

**Home Phone**

**City**

**State**

**Zip Code**

**Work Phone**

**Hire Date**

**Business Title**

**Department OPR**

**Department Name**

**Term Date**

**GL Pay Type**

**Annual Rate**

**Starting/Effective Date**

**Gross Pay**

**% FTE**

Comments: \_\_\_\_\_

For use by Office of Faculty Affairs and Human Resources only:  
Benelect Eligibility: E (eligible) N (not eligible)