



CAL MARITIME

**REQUEST FOR PERSONNEL ACTION (RPA)**

**STAFF AND MANAGEMENT POSITIONS**

- Management (Complete MPP Justification form)
- Staff
- Position Description (*REQUIRED FOR ALL RECRUITMENTS*)

**SECTION I: POSITION/PERSONNEL ACTION INFORMATION**

Department Name and Number:	Proposed Start Date:
Number of Openings:	Proposed End Date:
Classification:	Working Title:
Proposed Incumbent(s):	

**SECTION II: TYPE OF ACTION REQUESTED (Check one)**

<input type="checkbox"/>	Employment-New Position:		
<input type="checkbox"/>	Employment-Fill Vacant Position:	Former Incumbent:	Date Vacated:
<input type="checkbox"/>	Reclassify Position:	From:	To:
<input type="checkbox"/>	Extension of Appointment:	From:	To:
<input type="checkbox"/>	Increase in Time Base:	From:	To:
<input type="checkbox"/>	Decrease in Time Base:	From:	To:
<input type="checkbox"/>	Increase in Pay, Stipend or Bonus:	Type: Percentage:      % Or Amount: \$      per	
<input type="checkbox"/>	Transfer:	From:	To:
<input type="checkbox"/>	Approved Salary/Range:		
<input type="checkbox"/>	Justification/Other (explain):		

**SECTION III: TYPE OF APPOINTMENT (Check all that apply)**

Pay Plan	Employment Status	Time Base
<input type="checkbox"/> Academic Year	<input type="checkbox"/> Probationary/ Permanent	<input type="checkbox"/> Full-Time
<input type="checkbox"/> 12/12-Month	<input type="checkbox"/> Temporary	<input type="checkbox"/> Part-Time
<input type="checkbox"/> 11/12-Month	<input type="checkbox"/> Emergency Hire	<input type="checkbox"/> Time Varies
<input type="checkbox"/> 10/12-Month	<input type="checkbox"/> At-Will	<input type="checkbox"/> Hours per week:
<input type="checkbox"/> Summer Sea Term		
<input type="checkbox"/> Months Off (if 11/12 or 10/12):		

**SECTION IV: APPROVALS**

Human Resources Signature:	Date:
Manager/Director Signature:	Date:
Assoc./Asst. Vice President Signature:	Date:
Provost/Vice President Signature:	Date:
Budget Director Signature:	Date:
President Signature:	Date:

**SECTION V: HUMAN RESOURCES USE ONLY**

Requisition #	BU #	Job Code	Range Code	Position #
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Signature: \_\_\_\_\_

Signature: Chief Human Resources Officer

**Instructions:**

1. Complete the form
2. Include attachments as necessary (Position Description if a recruitment)
3. Obtain all necessary signatures before forwarding the RPA to Human Resources

**Complete Fields As Follows:**

<b>SECTION I</b> <b>Position/Personnel</b> <b>Action Information</b>	<input type="checkbox"/> Enter the hiring department name and number. <input type="checkbox"/> Enter proposed start date of hire or personnel action <input type="checkbox"/> Enter number of openings that are being filled <input type="checkbox"/> Enter proposed end date of hire or personnel action <input type="checkbox"/> Enter the classification of the position if known <input type="checkbox"/> Enter the working title of the position if known <input type="checkbox"/> Enter proposed incumbent's name if known
<b>SECTION II</b> <b>Type of Action Requested</b>	<input type="checkbox"/> Select type of personnel action requesting. <ul style="list-style-type: none"> <li>▪ <u>Employment -New Position</u> – newly created, never filled before.</li> <li>▪ <u>Employment-Fill Vacant Position</u> – enter the former incumbent and the date they separated.</li> <li>▪ <u>Reclassify Position</u> – enter current classification and new one.</li> <li>▪ <u>Extension of Appointment</u> – for a current temporary appointment, enter the extension dates.</li> <li>▪ <u>Increase in Time Base</u> – enter current time base and new higher one.</li> <li>▪ <u>Decrease in Time Base</u> – enter current time base and new lower one.</li> <li>▪ <u>Increase in Pay, Stipend or Bonus</u> – enter <b>type</b> of increase (i.e. IRP, Permanent Reclassification, Temporary Reclassification, Stipend, Bonus, etc.) and the percentage increase OR the rate per month, hour, or one time only.</li> <li>▪ <u>Transfer From</u> – in cases of reorganization such as change in department or supervisor, enter the current one and the new one. For department changes, include department number.</li> <li>▪ <u>Other</u> – miscellaneous.</li> </ul>
<b>SECTION III</b> <b>Type of Action Requested</b>	This section identifies the type of appointment being requested. <b><i>Check all areas that apply.</i></b> <input type="checkbox"/> Pay Plan – select type of pay plan for position <b>and</b> months off if 11/12 or 10/12 pay plan <input type="checkbox"/> Employment Status – select whether probationary/permanent or temporary position <input type="checkbox"/> Time Base – select whether Full-time, Part-time, or Time Varies (on-call). Enter hours worked per week.
<b>SECTION IV</b> <b>Approvals</b>	<input type="checkbox"/> RPAs must include Signature approval of the Department Manager, President/Provost/or Vice President and Budget Director.
<b>SECTION V</b> <b>Human Resources Only</b>	For HR Only – no action required