

NAME (Last, First)	Title/Rank	Dept.	SALARY BASE (Based on 1.0 FTE, FY unless noted)		Stipend		(N)ew or (R)eplacement & Date/Hire	% Change	Actual FTE	Effective (Indicate end date if temp)	Reason	SPECIAL CONDITIONS	Tenure (Change Only)
			From:	To:	From:	To:							

**I. NEW HIRES**

**A. Administrators/Professionals/Coaches**

NAME (Last, First)													
NAME (Last, First)													

**B. Faculty**

NAME (Last, First)													
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**II. CHANGES**

**A. Administrators/Professionals/Coaches**

Fete, Matthew	Dean, College of Health	College of Health							1.0				T
NAME (Last, First)													
NAME (Last, First)													

**B. Faculty**

NAME (Last, First)													
NAME (Last, First)													
NAME (Last, First)													

<b>TOTALS</b>			<b>0</b>	<b>0</b>									
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**III. ONE TIME BONUS ONLY**

**A. Administrators/Professionals/Coaches**

NAME (Last, First)													
NAME (Last, First)													
NAME (Last, First)													
NAME (Last, First)													

<b>TOTALS</b>			<b>0</b>	<b>0</b>									
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**C. Post-Retirement**

NAME (Last, First)	TITLE/RANK	Dept.	SALARY (Based on .33FTE) (AY unless noted)		TERM OF HIRE								
NAME (Last, First)		Dept.											
NAME (Last, First)		Dept.											

**III. End of Employment / Leaves (Report only non-renewals per 711.1 and Leaves of Absence)**

NAME (First, Last)	Title/Rank	Dept.	Effective Date	REASON (If Leave of Absence)
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**A. Administrators/Professionals/Coaches**

