

# Change Assignment History Request Form

This form is used to request a manual change be made to an individual's personnel record due to the inability of processing requested change via an ACT document. The form should be completed and forwarded to Payroll Services via email ([Payhelp1@uab.edu](mailto:Payhelp1@uab.edu)) or fax (205-975-7417).

## I. ACT DOCUMENT INFORMATION:

HAS AN ACT DOC BEEN CREATED? YES NO

ACT Document #: \_\_\_\_\_ Effective Date: \_\_\_\_\_ Document Reason: \_\_\_\_\_

Were you able to submit the document into workflow? YES NO

If you answered **NO** to either of the questions above, please indicate why: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## II. PLEASE ENTER BOTH THE INDIVIDUALS CURRENT ASSIGNMENT AND/OR SALARY INFORMATION AND THE PROPOSED CHANGES:

Employee Name: \_\_\_\_\_ Employee ID Number: \_\_\_\_\_

GENERAL ASSIGNMENT/SALARY INFORMATION	CURRENT INFORMATION	PROPOSED CHANGES
ASSIGNMENT CATEGORY		
ORGANIZATION		
POSITION		
JOB		
PREMIUM PLAN (RMS ONLY)		
SHIFT DIFFERENTIAL (COMP ONLY)		
ACTUAL ASSIGNMENT RATE OF PAY		
SALARY BASIS/PAYROLL		

- Insert proposed changes: YES NO

If **Yes**, enter the date range proposed changes are to take effect: From: \_\_\_\_\_ To: \_\_\_\_\_ \*\*

(\*\*Entering a date prior to the current date in the **To:** field will require multiple request forms be submitted to rebuild history.)

- Replace information with proposed changes: YES NO

If **Yes**, enter the effective date of the proposed changes: \_\_\_\_\_

## III. UAB DEPARTMENT CONTACT INFORMATION:

Department Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## IV. APPROVALS: (Based on the ACT Document Reason specified, one WAM approver for each level must sign prior to submitting the request form)

\_\_\_\_\_  
Level One Approver (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Level Two Approver (When Applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Level Three Approver (When Applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Level Four Approver (When Applicable)

\_\_\_\_\_  
Date