EPAF Instructions
Hourly Full Time Hire - Grant

Last Updated: 8/4/15
DATA INTEGRITY

Data integrity is very important when entering EPAF information.

Please adhere to the following guidelines:

- All required fields in the EPAF must be populated.
- No symbols or punctuation may be used in the EPAF (e.g. & , . + # @)
  - With the exception of the dot after the name’s prefix (e.g. Mr., Ms., Dr., etc.)
- All fields are case sensitive. Do not use All Caps in any field.
  - An exception example is “PO Box” for Post Office

Note: An EPAF may be returned for correction if data integrity guidelines are not met.

CHANGE IN HIRE DATES

If an employee cannot start work on the date originally provided by the originator on the EPAF, Human Resources will return the EPAF for correction so that the new hire date can be entered. The EPAF will have to go through the approval process again after the originator has made changes.
Query Date

Enter the Actual Date the employee begins working on the grant.

IDENTIFICATION INFORMATION

Last Name: Enter the employee’s last name. (Required)
First Name: Enter the employee’s first name. (Required)
Middle Name: Enter the employee’s middle name.
Name Prefix: Enter the employee’s name prefix e.g. Mr., Ms., Dr. (Required)
Name Suffix: Enter the employee’s name suffix e.g. Jr., III. (Optional)
Gender: Select the employee’s Gender – Male or Female. (Required)
Address Line 1: Enter the first line of the employee’s address. (Required)
Address Line 2: Enter the second line of the employee’s address.
Address Line 3: Enter the third line of the employee’s address.
City: Enter the city of the employee’s address. (Required)
State: Select the state of the employee’s address. (Required)
ZIP or Postal Code: Enter the zip or postal code of the employee’s address. (Required)
Nation: Enter the country of the employee’s address. (Required)
Address From Date: Enter the date from which the employee’s address will be effective. This is usually the date of hire. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)
EMPLOYEE INFORMATION

Home Organization: Enter the employee’s home organization. (Required)

Distribution Orgn: Enter the check distribution organization. The distribution org is the organization number of the department where the employee can pick up his/her paycheck. (Required)

Current Hire Date: Enter the Actual Date on which the employee is begins working on the grant. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009. (Required)

JOB INFORMATION

Job Begin Date: For employees having the position number for the first time, enter the Actual Date that the employee starts work on the grant. For employees who previously had the position number, leave blank. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009

Jobs Effective Date: Enter the Actual Date on which the employee is begins working on the grant. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)

Personnel Date: Enter the date on which the employee is starts working on the grant. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)

Regular Rate: Enter the employee’s hourly rate. Do not enter $ before the amount. (Required)

Timesheet Orgn: Enter the employee’s time sheet org. Example: Suzie Q is the approver for John D’s time. Suzie Q approves time sheet org 10001A. Therefore, John D’s time sheet org will be 10001A. (Required)

Time Entry Method: Defaults to “Employee Time Entry via Web”. Note: Only change to “Department Time Entry with Approvals” if the employee’s time is entered into Banner by the department. (Required)

Hours per Day: Hours per Pay = Hours per Pay divided by 10. (Required)

Hours per Pay: Enter number of hours that the employee is expected to work per pay period. The Hours per Pay must be greater than or equal to 60. (Required)

FTE (Full time equivalency): Defaults to 1. FTE = Hours per Pay / 80. The FTE must be greater than or equal to 0.75. (Required)
**Workers Comp Code:** Select the Worker’s Comp Code that best describes the nature of the employee’s work for this position. Descriptions of available Worker’s Comp Codes are below. (Required)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6836</td>
<td>Marina Operators</td>
</tr>
<tr>
<td>7380</td>
<td>Drivers and Garage Employees</td>
</tr>
<tr>
<td>8868</td>
<td>Professional-Clerical Staff – Any office-related work</td>
</tr>
<tr>
<td>9101</td>
<td>Manual Labor – Facilities, Security Guards, Food Service Areas, Shipping Receiving, Coaches</td>
</tr>
</tbody>
</table>

**Supervisor ID:** Enter the Direct Supervisor’s ID number. (Required)

**Supervisor Position:** Enter the Direct Supervisor’s position number if not the primary position.

**Supervisor Suffix:** Enter the suffix for the Direct Supervisor’s position number if not the primary position.

**JOB TERMINATION**

**Jobs Effective Date:** Enter the **Actual Date** on which the employee is expected to **stop** working on the grant. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)

**Personnel Date:** Enter the date on which the employee is expected to **stop** working on the grant. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)
ROUTING QUEUE

<table>
<thead>
<tr>
<th>Approval Level</th>
<th>User Name</th>
<th>Required Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 - (20) 20</td>
<td></td>
<td>Approve</td>
</tr>
<tr>
<td>30 - (30) 30</td>
<td></td>
<td>Approve</td>
</tr>
<tr>
<td>50 - (50) 50</td>
<td></td>
<td>Approve</td>
</tr>
<tr>
<td>55 - (55) 55</td>
<td></td>
<td>Approve</td>
</tr>
<tr>
<td>75 - (75) 75</td>
<td></td>
<td>FYI</td>
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<tr>
<td>85 - (85) 85</td>
<td></td>
<td>Approve</td>
</tr>
<tr>
<td>90 - (90) 90</td>
<td></td>
<td>Apply</td>
</tr>
</tbody>
</table>

Enter the Banner ID of an approver for each approval level or click on the magnifying glass to search for and select an approver’s Banner ID.

**Hourly Full Time Hire - Grant Approval Level Descriptions**

- 20 – Department Head or Supervisor
- 30 – Dean or Director
- 50 – Office of Sponsored Programs
- 55 – Senior Vice Provost or Associate VP for Financial Affairs
- 75 – Budget Office
- 85 – Employment Administration
- 90 – Human Resources

COMMENT

**Required:** Copy the email from the grant’s Principal Investigator showing his/her approval for this position into the Comment box. Comments can be seen by approvers and Human Resources.

Click the **Save** button to save the EPAF. **NOTE:** *An EPAF does not have to be submitted as soon as it is saved. You can exit the EPAF and return later to make changes or submit it.*
Click the **Submit** button to submit the EPAF for approval.