EPAF Instructions
Temporary Employee New Hire – Non Grant

Last Updated: 8/7/15
DATA INTEGRITY

Data integrity is very important when entering information on the EPAF.

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** on which the employee starts working.

**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

**Employee Class Code:** Enter the employee’s employee class. (Required)

- 18 - Temporary Full-Time employees
- 19 - Temporary Part-Time employees

**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** the employee starts working. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)

JOB INFORMATION

**Job Begin Date:** Enter the **Actual Date** the employee starts working. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)

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

**Personnel Date:** Enter the **date** the employee **starts** working. 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 of pay. 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 divided by 10. (Required)

**Hours per Pay:** Enter number of hours that the employee is expected to work per pay period. (Required)

**FTE** (Full time equivalency): \( FTE = \text{Hours per Pay} / 80 \). (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. 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. The date must be entered in the format MM/DD/YYYY e.g. 08/23/2009 (Required)
Routing Queue

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.

**Temp Employee New Hire – Non Grant Approval Level Descriptions**

20 – Department Head or Supervisor  
30 – Dean or Director  
70 – Provost or Budget Office  
85 – Employment Administration  
90 – Human Resources

**COMMENT**

Comments can be seen by approvers and HR.

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.