UNIVERSITY OF LOUISVILLE
PERSONNEL RECOMMENDATION
BOARD OF TRUSTEES

P-104
(Revised 06/10)

Employee ID #: _____

TERM, TERM/ROLLING, and PART-TIME
REAPPOINTMENTS ONLY

_____ _____ _____
Name Highest Degree Institution Degree Earned

Rank and Position at UofL_____

_____

Date of Recommended Action: _____ _____
Start End

Salary: Base Salary _____ PCN# _____ Appointment (Faculty Only): □ 10 mo □ 11 mo □ 12 mo
Supplemental_____
VA Appointment _____ Pay Over: □ 10 mo □ 11 mo □ 12 mo

Indicate source of salary:

Amount	Account Number	Amount	Account Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: _____

If any individual has a joint appointment with another unit, endorsement of the appropriate dean should be given below:

_____ _____
Dean's Signature Date

Please update the following information:

Home Address: _____ Telephone: _____

Degree	Institution	Date Awarded	Area of Study