

**THE UNIVERSITY OF NORTH CAROLINA AT GREENSBORO  
EPA PERSONNEL ACTION FORM**



ID # 5249 Date June 1, 2005

1. Social Security No. 111-22-333  
 2. Name: Dr. Hensley, Adrian T.  
 3. Address: 8861 W. Friendly Avenue  
Greensboro, NC 27410  
 Country: U.S.A.

4. Division: 01 Unit: 22 Ltr: \_\_\_\_\_  
 Dept No.: 291 RF: \_\_\_\_\_  
 Dept. Name: ROMANCE LANGUAGES

5. Building: 159 Room # 100  
 Campus Phone: 334-5241

14. Employee's Salary to be paid from sources as follows:

Posn #	Sources (Budget Subhead)	Amount	FTE
<u>1894</u>	<u>2 - 01291 - 1310</u>	<u>\$ 65,000.00</u>	<u>1.</u>

6. Benefits   
 Increase Recommender: 291  
 Timekeeper Location: 291  
 Check Dist. Code: 291

7. I-9 Certification Needed   
 I-9 Certification Date: \_\_\_\_\_

8. Student

9. Teaching Position

10. AAO Forms Complete

11. Credentials Verified

12. U.S. Citizen  Type Visa: \_\_\_\_\_

**Totals--** Amount: **\$ 65,000.00**  
 FTE: **1.00**

15. Plus Salary Increase:

13. Comments:

**To place on Extended Illness leave for 60 calendar days, effective 6/16/2005-8/14/2005.  
 Tenure clock does not stop.**

1  
 2  RESEARCH ASSIGNMENT  LEAVE OF ABSENCE  OFF CAMPUS ASSIGNMENT

Full Pay  Partial Pay  Without Pay  
 Purpose of assignment:

Effective Date: <u>06/16/2005</u>	Ending Date: <u>08/14/2005</u>		
Total Salary during research assignment	From State funds	From other University sources	From non-University sources
\$ _____	\$ _____	\$ _____	\$ _____

3  
 4 **SEPARATION, REMOVAL FROM PAYROLL** Effective Date: \_\_\_\_\_

Rank \_\_\_\_\_  
 Separation Reason Other Other **New PD7 to be forwarded prior to 8/14/2005.**  
 Reason for resignation \_\_\_\_\_

CHANCELLOR	VICE CHANCELLOR	GRAD. SCHOOL (Student only)	DEAN/DIRECTOR	DEPARTMENT HEAD	BUDGET OFFICE
Approval .....	Approval .....	Approval .....	Approval	Approval .....	Approval .....
Date .....	Date .....	Date .....	Date .....	Date .....	Date .....