

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



ID # 3850

Date April 25, 2005

- 1. Social Security No. 000-11-222
- 2. Name: Dr. Goodchild, Adelaide M.
- 3. Address: 603 Knightwood Drive  
Greensboro, NC 27402  
Country: U.S.A.
- 5. Building: 63 Room # 100  
Campus Phone: 334-5241
- 6. Benefits   
Increase Recommender: 288  
Timekeeper Location: 288  
Check Dist. Code: 288
- 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: \_\_\_\_\_

4. Division: 01 Unit: 22  
Dept No.: 288  
Dept. Name: PSYCHOLOGY

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

Posn #	Sources (Budget Subhead)	Amount	FTE
2201	2 - 01288 - 1310	\$ 65,000.00	1
<b>Totals--</b>		<b>Amount: \$ 65,000.00</b>	<b>FTE: 1.00</b>

15. Plus Salary Increase:

13. Comments:

**To place on research assignment with full pay for the Fall 2005 semester. A PD7 is attached to return to regular teaching assignment on 01/01/2006.**

1  
2  RESEARCH ASSIGNMENT  LEAVE OF ABSENCE  OFF CAMPUS ASSIGNMENT

Full Pay  Partial Pay  Without Pay

Purpose of assignment:

Research for book

Effective Date: 08/01/2005

Ending Date: 12/31/2005

Total Salary during  
research assignment  
\$ 32500.

From State  
funds  
\$ 32500.

From other  
University sources  
\$ \_\_\_\_\_

From non-  
University sources  
\$ \_\_\_\_\_

3  
4 **SEPARATION, REMOVAL FROM PAYROLL Effective Date: 12/31/2005**

Rank Professor

Separation Reason Other

Other New PD7 attached effective 01/01/2006

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 .....