

## **Department Changes**

**Step 1:** The Activity Number & Department Maintenance Request eForm is located within PantherSoft HR under Self-Service  $\rightarrow$  Employee Resources  $\rightarrow$  Employee Forms  $\rightarrow$  Compensation Forms.

FIU
orites Main Menu > Self Service > Employee Resources > Employee Forms
Academic Affairs Forms
Benefits Forms
Compensation Forms
⇒ Activity Number & Department Maintenance Request eForm
⇒ Additional Compensation Request
⇒ <u>Administrative/Staff Change In Status Form</u>
Employee Labor Relations Forms
Employee Records Forms
Equal Opportunity Programs & Diversity Forms
Payroll Forms
Recruitment Forms

**Step 2:** Choose Department Changes and click Start.

Division of Business and Finance/Division of Human Resources							
Requested By:	Jacqueline Barba	Contact Phone Number:	305-348-2466				
Email Address:	rodrigja@fiu.edu		303 348 2400				
Select a transactio	n to proceed:						
<ul> <li>New Departmen</li> <li>New Activity Nui</li> <li>Department Cha</li> </ul>	t Request <u>mber</u> Request inges						
Start							

**Step 3:** Search for the Existing Department by Department Number or by Description in the Department Description field.

		HR Department Change	•	March 6, 20
Requested By:	Jacqueline Barba	Evicting Department		Dan asknask Dagavislan
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Financial Track	ada.		Location.	Select 👻
Tillancial free N	select	Ŧ		
Default Activity N	Number:			
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b op al cillion cillion	agon Panaler ID	Hanager Hane		
Primary Expense	e / Asset Manager:			
Panther ID	Manager Name			
Secondary Expe	nse Manager:			
Panther ID	Manager Name			
Primary HR Cont	act:			
Panther ID	Contact Name			
Secondary HR C	ontact:			
Panther ID	Contact Name			
Other HR Contac	ct			
Panther ID	Contact Name			
Add Rows Delet	e Rows			
	24.270 A. (10.10) A.			
🔲 View Depart	ment Request' History			
I certify that	the above information	is correct.		

Note: Submit one form for each department where you are the HR Contact.

**Step 4:** Change information on either the Primary, Secondary, or Other HR contact. Make any other changes as necessary, check the "I certify" section, and press Submit.

Requested By:       Jacqueline B         Effective Date:       03/06/2014         Reports to Department:       Proposed Description:         Financial Tree Node:       See         Default Activity Number:       See         Department Manager:       Panther ID         Primary Expense / Asset Ma       Secondary Expense Manage         Panther ID       Secondary Expense Manage         Primary HR Contact:       Panther ID         Panther ID       Secondary HR Contact:         Panther ID       Secondary HR Contact         Panther ID       Secondary HR Contact         Secondary HR Contact       Secondary IR         Secondary IR Contact	Barba E iepartment elect ther ID	xisting Department 12250 Department Description	Business Unit: Location:	Select *
Reports to Department:       Department:         Proposed Description:       Financial Tree Node:         Financial Tree Node:       See         Default Activity Number:       Department Manager:         Primary Expense / Asset Manage       Panther ID         Primary HR Contact:       Panther ID         Primary HR Contact:       Panther ID         Potondary HR Contact:       Panther ID         Other HR Contact       Panther ID         Delete Rows       Panther ID	epartment.	Department Description	Business Unit: Location:	Select +
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Panther ID Primary HR Contact: Panther ID Primary HR Contact: Panther ID Secondary HR Contact: Panther ID Other HR Contact Panther ID Other RR Contact Panther ID I Add Rows Delete Rows View Department Requi		al Income Concernation	Current: Hardı	ick,Jaffus
Panther ID Primary HR Contact: Panther ID Primary HR Contact: Panther ID Secondary HR Contact: Panther ID Other HR Contact Panther ID Add Rows Delete Rows	Manager Name	Ourrent: Barba Jao	queline	
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Primary HR Contact: Panther ID Secondary HR Contact: Panther ID Other HR Contact Panther ID Add Rows Delete Rows View Department Requirement	Manager Name	Current: Townsend	l,Christopher M	
Secondary HR Contact: Panther ID Other HR Contact Panther ID Add Rows Delete Rows View Department Requi		Current: Barba lao	queline	
Contact In Contact  Panther ID  Other IR Contact  Panther ID  Add Rows  Delete Rows  View Department Requ	Concact Manie		queime	
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Add Rows Delete Rows           View Department Require		-1		
View Department Requ	Contact Name			
I certify that the above	uest' History e information is corr	ect.		
		Business Unit Head		
		Submit Form Clear Form	1	

**Step 5:** Once the form is submitted, approvers will be notified to approve and the requester will receive an email with the form link to track the status (see sample email below).



Dear Requester,

Your Department Change Request has been received and will be forwarded to:

Business Unit Head ---> Academic Affairs (if applicable) ---> Compensation ---> FSSS (if applicable).

You will receive a notification when the process is complete; however, you may review the status of the request via the link below at any time.

## Click here to view the e-form

For questions about the HR Department Change, please contact Compensation Administration at cmpadmin@fu.edu or by calling 305-348-4996.

Thank you for your time and attention.

Department: XXXXXXXXX Department Description: <Department Name> Form ID: 321YY3C\_008Q8ZFJQ000SRR