

The Position Approval Memo (PAM) Form for Faculty is used to request a new position or change existing position information for full-time and regular part-time benefits eligible faculty positions (GA jobs do not require position numbers). Please submit completed forms to HRCComp@syr.edu.

PIN Information

	Current	Proposed
Effective Date	_____	_____
Request is for	_____	<input type="checkbox"/> New Position (PIN) <input type="checkbox"/> Existing Position Change
PIN Number (for changes only)	_____	_____
Job Code	_____	_____
Job Title	_____	_____

Faculty Positions Only

FTE	_____	FTE based on _____ work units/week
Home Department / Location <small>9 digits (10101-1001)</small>	_____	_____
Fund	_____	_____
Department Number	_____	_____
Program	_____	_____
Account	_____	_____
Supervisor Position Number	_____	_____
Pay Group	_____	_____
Number Of Pays	_____	_____
Employee Type	_____	_____

Justification (Required)

Justification - explain in detail the business reason for the change.

Attach appropriate documentation if necessary.

Approvals

Dean/Director/Dept. Head or Authorized Signer (required) _____ **Date** _____

Cabinet Officer (required if non-sponsored) _____ **Date** _____

Vice Chancellor/Provost and Executive Vice President/CFO _____ **Date** _____

(both required for NEW PIN or if non-sponsored)

Submitted By (Name and SUID) _____ **Date** _____