|  |  |
| --- | --- |
|  | **Employee Profile Maintenance** |
| *This form is used to setup and maintain employees in Cardinal in order for employee expense transactions to be processed and / or Cardinal access to be granted.* |
| *\*Denotes a required field.* |
| **Reason (select one)** |
|  |
|  | Add New State Employee |  | Termination |  | Other *(please specify a reason)*: |
|  | Update Existing Employee Information |  |
|  | Transfer To / From Other State Agency |  | Employed by More Than One State Agency *(identify other agencies)* |
| \*Business Unit *(5 digits)*: |  | Business Unit 2: |  | Business Unit 3: |  |
|  |
| **Employee Data** |
|  |
| \*Employee ID *(11 digits)*: |  | *(CIPPS ID)* |
| \*Last Name: |  | \*First Name: |  |  |
| Telephone Number: |  |  | Employee Base: |  | Home |  | Office |
| \*Personnel Status: |  | Payments Sent To: |  | Home Address |
|  |  | Employee |  | Non-Employee  |  | Mailing Address |
|  | *(must have prior approval from Cardinal)* |  |
| **Home Address** |
| Country: | USA |  |
| Address 1: |  |
| Address 2: |  |
| City: |  | County: |  |
| Postal: |  | State: |  |
|  |
| **Complete if Mailing Address is Different From Home Address** *(‘Payments Sent To: Mailing Address’ must be checked above)* |
| Country: | USA |  |
| Address 1: |  |
| Address 2: |  |
| City: |  | County: |  |
| Postal: |  | State: |  |
|  |
| **Organizational Data** |
| **HR Information:** | **Supervisor Information***(individual approving expenses)***:** |
| \*Employee Status: |  | \*Supervisor Employee ID: |  |
|  |  | Active |  | Inactive |  | Terminated |  Supervisor Name: |  |
|  |
| Hire Date: |  |  |
| \*GL Unit: |  | \*Department: |  |  |
|  |
| **Default ChartField Values:** |
| \*GL Unit | Fund | Program | \*Department | Cost Center |
|  |  |  |  |  |
| Task  | FIPS | Asset | Agency Use 1 | Agency Use 2 |
|  |  |  |  |  |
|  |
| **For Processor Use Only** |
| Entered By: |  | Date: |  |