

Instructions

Please complete the form and forward it electronically along with a draft "Notice of Layoff" or "Notice of Reduction in Time" letter to the employee as follows:

1. Department to Control Unit
2. Control Unit to Employee & Labor Relations (ELR)
3. ELR to EEO/Affirmative Action Planning (EEO/AAP), if required
4. EEO/AAP to ELR
5. ELR to Department (with copy to Control Unit)

Employee Information

Please select one:

Indefinite Layoff
 Temporary Layoff
 Indefinite Reduction in Time
 Temporary Reduction in Time

If Reduction in Time, to What %: _____

Current Appointment %: _____ Department Name: _____

Payroll Title: _____ Title Code: _____

Effective Date of Action (MM/DD/YYYY): _____ Approval Needed by (MM/DD/YYYY): _____

Fund Sources (provide FAUs): _____ General Fund (1990): Yes No

If other fund source, please specify: _____

Reason for Action

Lack of Funds
 Lack of Work
 Organizational Change
 Other

Explain Reason for Action (attach additional sheets, if necessary):

Designated Employee	Employee ID#	Gender	Ethnicity	Age

Most Recent Date of Hire: _____ Seniority Points through effective date of proposed action: _____

Did the employee have prior service at another UC location *immediately* prior to employment at UCR? Yes No

If yes, which location: _____

Method for determining order of layoff/reduction in time. Please check all that apply.

	Seniority	If so, please attach a list of all employees in the classification with seniority points. Include employee's name, gender, ethnicity, age and seniority points projected through the effective date of the proposed action.
	Special Skills	If so, please attach position description outlining the required skills, knowledge and abilities (SKAs), and a memo outlining how retention of less senior employee(s) preserves critical SKAs, and how these skills are necessary to the ongoing function of the department/division.
	Documented Performance	Attach copies of the two most recent performance evaluations and any disciplinary records contained in the personnel file for the employee being laid off and all other employees in the same classification with less seniority.
	More senior employee requested layoff	If so, attach the request from the senior employee.

Will limited or causal-restricted employee(s) be retained?

Yes

No

If yes, provide justification for retention of limited and/or causal-restricted employees. (attach additional sheets, if necessary)

If duties currently performed by the position employee designated for layoff/reduction in time will be reassigned to other staff, please identify which duties will be assigned to which other position(s), include a description of the duties and % FTE to be reassigned, and the title and bargaining unit of position(s) assuming the duties. (attach additional sheets, if necessary)

Current Salary (\$):

Severance Amount (\$):
