

THE FLORIDA STATE UNIVERSITY
REQUEST FOR APPROVAL TO PAY MOVING EXPENSES

TO: The Florida State University Office Of Human Resources Tallahassee, FL 32306-2410		FROM:													
1. Name of Employee or Applicant:	2. FSU Employee ID #:	3. Beginning Date of Employment:													
4. Type of Appointment: (Circle One) <div style="display: flex; justify-content: space-around; margin-top: 10px;"> Original Promotion Reassignment Demotion Transfer </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> FROM TO </div> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Class Title</td> <td style="width: 34%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">Pay Plan</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Rate of Pay</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Place of Work</td> <td></td> </tr> </table>					Class Title			Pay Plan			Rate of Pay			Place of Work	
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5. JUSTIFICATION: No commitment to expend university funds for the payment of moving expenses shall be made without prior approval by the Chief HR Officer. Payment of moving expenses for this employee/applicant is in the best interest of the State of Florida and The Florida State University, for the following reason/s: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Initial appointment where recruitment was difficult <input type="checkbox"/> Transfer in lieu of layoff <input type="checkbox"/> Intra-agency/Geographical transfers for the benefit of the university <input type="checkbox"/> Lateral or promotional transfer for fully justified broadening of career <input type="checkbox"/> Competitive market requires payment of moving expenses </div> <div style="width: 50%;"> <input type="checkbox"/> Regional or National recruitment was necessary <input type="checkbox"/> Other (attach explanation) </div> </div>															
6. ESTIMATED COST TO THE FLORIDA STATE UNIVERSITY: The estimated gross weight for which The Florida State University will be responsible for payment in connection with this move is _____ pounds. The cost of this move is estimated to be \$_____. The department will cover \$_____ of the cost. Sufficient budgeted funds are available for this expense. The move will be made on or about the date of _____. Approval shall be for the move to take place no later than ninety days after the anticipated date specified. If the cost of the move exceeds the approval estimated cost by an additional 25% or greater, a revised request must be submitted for approval of the additional cost. Moving expense payments of \$75,000 or more must be competitively solicited in accordance with Chapter 287.017, F.S. and Regulation FSU-2.015. Moving expense payments of less than \$75,000 must follow the Purchasing Department Policies and Procedures regarding moving expenses by using one of the available carriers on contract or secure three guaranteed "Not to Exceed" price quotes from other movers.															
7. _____ Department Head		8. _____ Chief Human Resources Officer													
9. _____ Date		10. _____ Date													
11. ACTION TAKEN: () Approved up to a maximum of 15,000 pounds. () Approved in excess of 15,000 pounds. () Disapproved															
12. By: _____ <div style="display: flex; justify-content: space-between;"> Dean/Vice President Date </div>															
Remarks:															