

**Corporate Personnel System (CPS) PPP711
As of Payroll Release 1884 – 11/22/09**

Employee Record Layout

Position	Length/ Format	Field Description	Data Element #	Comments
1 – 2	2	Location		
3 – 11	9	Employee Identification Number		
12 – 46	35	Employee Name	EDB0105	
47 – 76	30	Address Permanent Line One	EDB0204	
77 – 106	30	Address Permanent Line Two	EDB0205	
107-127	21	Address Permanent City	EDB0206	
128-129	2	Address Permanent State	EDB0207	
130-134	5	Address Permanent ZIP	EDB0208	
135-137	3 99V9	Number of Registered UC Student Units	EDB0237	
138	1	Senior Management Supplement Exception Indicator	EDB0412	
139	1	Senior Management Supplement Override Contribution Rate	EDB0413	
140	1	Home Address Disclosure Indicator	EDB0211	
141-149	9	Social Security Number	EDB0111	
150	1	Sex Code	EDB0108	
151-156	6 (yymmdd)	Date of Birth	EDB0107	
157	1	Citizenship Status Code	EDB0109	
158-159	2	Ethnic Origin Code	EDB0112	
160	1	Retirement System Code	EDB0122	
161	1	FICA Eligibility Code	EDB0120	
162	1	Unemployment Insurance Coverage Code	EDB0121	
163	1	UC Student Status Code	EDB0119	
164-172	9	Previous ID Number		See footnote ¹
173-175	3	Prior Service Credit Months	EDB0146	
176	1	Special Training Code	EDB0385	
177	1	Armed Forces Service Medal Veteran Code	EDB0344	
178-193	16	Organization Code		See footnote ²
194	1	Position Type Code		See footnote ³

¹ If New ID Number equals Key ID Number, move Old ID Number to Previous ID Number, else set previous ID Number to blanks.

² Up to four GTN numbers associated with union dues, agency fee, or charity.

³ Derived from EDB0160 (Employee Relations Code):

If EDB0160 = A or B then '1'

If EDB0160 = C or D, then '2'

If EDB0160 = G then '4'

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Position	Length/ Format	Field Description	Data Element #	Comments
195	1	Confidential Information Code		See footnote ⁴
196-201	6 (yymmdd)	Most Recent Hire Date	EDB0113	
202-205	4 (yymm)	Next Salary Review	EDB0136	
206	1	Next Salary Review Type	EDB0135	
207	1	Employment Status Code	EDB0144	
208-209	2	Visa Type Code	EDB0110	
210-213	4	Merit Percent	EDB0153	
214-219	6 (yymmdd)	Separation Date	EDB0140	
220-221	2	Separation Reason Code	EDB0141	
222-227	6 (yymmdd)	Leave of Absence Begin Date	EDB0137	
228-233	6 (yymmdd)	Leave of Absence Return Date	EDB0138	
234-235	2	Leave of Absence Type Code	EDB0139	
236	1	DCP Plan Code	EDB0129	
237-240	4	Sick Leave Used		Zero Filled
241-245	5	Sick Leave Hours Balance (Current)	EDB5186	
246	1	Retirement/FICA Derivation Indicator	EDB0238	
247-249	3	Vacation Used		Zero Filled
250-252	3	Vacation Leave Hours Balance (Current)	EDB5185	
253-256	4	Vacation Lost		Zero Filled
257-259	3	Compensation Time Used		Zero Filled
260-263	4	Compensatory Time Hours Balance (Current)	EDB5110	
264-268	5	Overtime Paid		Zero Filled
269-273	5	Overtime Worked		Zero Filled
274-279	6	Overtime Hours Worked YTD	EDB5103	
280	1	Month Pay Indicator-January	EDB0171	
281	1	Month Pay Indicator-February	EDB0172	

If EDB0160 = E, F, H, or I, then '3'.

⁴ Derived from EDB0160 (Employee Relations Code):

If EDB0160 = F, B or D, then 'Y'

If EDB0160 = G, then 'X'

If EDB0160 = A,C, E, H or I, then 'N'

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Position	Length/ Format	Field Description	Data Element #	Comments
282	1	Month Pay Indicator-March	EDB0173	
283	1	Month Pay Indicator-April	EDB0174	
284	1	Month Pay Indicator-May	EDB0175	
285	1	Month Pay Indicator-June	EDB0176	
286	1	Month Pay Indicator-July	EDB0177	
287	1	Month Pay Indicator-August	EDB0178	
288	1	Month Pay Indicator- September	EDB0179	
289	1	Monthly Pay Indicator- October	EDB0180	
290	1	Monthly Pay Indicator- November	EDB0181	
291	1	Monthly Pay Indicator- December	EDB0182	
292-297	6 (yymmdd)	Accidental Death and Dismemberment Coverage Effective Date	EDB0282	
298	1	Accidental Death and Dismemberment Coverage Code	EDB0281	
299-301	3	Accidental Death and Dismemberment Principal Sum	EDB0280	
302-307	6 (yymmdd)	Dental Plan Coverage Effective Date	EDB0274	
308-309	2	Filler		
310-315	6 (yymmdd)	Supplemental Life Insurance Coverage Effective Date	EDB0277	
316	1	Supplemental Life Insurance Plan Code	EDB0276	
317-319	3	Supplemental Life Insurance Salary Base	EDB0275	
320	1	Dependent Life Insurance Plan Code	EDB0278	
321-326	6 (yymmdd)	Medical Plan Coverage Effective Date	EDB0294	
327-328	2	Medical Plan Code	EDB0292	
329	1	Department Location Indicator		From Home Department Table
330-332	3	Medical Plan Coverage Code	EDB0293	
333-338	6 (yymmdd)	Basic Life Insurance Effective Date	EDB0451	
339-340	2	Employee Benefit Eligibility Unit Code	EDB0445	
341	1	Employee Benefit Eligibility Representation Code	EDB0446	

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Position	Length/ Format	Field Description	Data Element #	Comments
342	1	Employee Benefit Eligibility Derivation Indicator	EDB0447	
343	1	Filler		
344-345	2	Primary BELI Status Qualification Code	EDB0240	
346-351	6 (yymmdd)	Primary BELI Status Qualification Effective Date	EDB0241	
352-353	2	Secondary BELI Status Qualification Code	EDB0242	
354-359	6 (yymmdd)	Secondary BELI Status Qualification Effective Date	EDB0243	
360	1	UC Paid Temporary Disability Insurance Code	EDB0123	
361-363	3	Medical Contribution Base – Current year	EDB0289	
364-366	3	Medical Contribution Base – Next Year	EDB0290	
367-368	2	START Reduction Percentage	EDB0495	
369	1	War/Campaign/Expedition Veteran Status Code	EDB0345	
370	1	Vietnam Era Veteran Status Code	EDB0350	
371	1	Veteran Disability Status Code	EDB0351	
372	1	Handicapped Status Code	EDB0352	
373	1	Insurance Reduction Code	EDB0299	
374-375	2	Employee Unit Code	EDB0255	
376	1	Employee Special Handling Code	EDB0256	
377	1	Employee Distribution Unit Code	EDB0257	
378	1	Employee Representation Code	EDB0295	
379-384	6 (yymmdd)	Executive Life Insurance Effective Date	EDB0452	
385-390	6 (yymmdd)	Original Hire Date	EDB0704	
391	1	Depcare FSA Participation Indicator		See footnote ⁵
392	1	E-Verify Status Code	EDB1165	
393-398	6	E-Verify Date	EDB1164	

⁵ Derived from GTN #227
if 6227G has a deduction in it, then 'Y'
if no deduction then 'N'.

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Position	Length/ Format	Field Description	Data Element #	Comments
	(yymmdd)			
399	1	Filler		
400	1	FCP Select Flag		See footnote ⁶
401-402	2	Dental Plan Code	EDB0272	
403-405	3	Dental Coverage Code	EDB0273	
406	1	Federal Tax Marital Status Code	EDB0127	
407	1	State Tax Marital Status Code	EDB0130	
408	1	Employee Level WOS Indicator	EDB0778	
409-414	6 (yymmdd)	Vision Plan Coverage Effective Date	EDB0349	
415-416	2	Vision Plan Code	EDB0347	
417-419	3	Vision Plan Coverage Code	EDB0348	
420-423	4 (yymm)	Recently Separated Veteran Date	EDB0381	
424-426	3	Basic Life Insurance	EDB0330	
427	1	UCRS Short Loan		See footnote ⁷
428	1	UCRS Long Loan		See footnote ⁸
429-430	2	Legal Plan Code	EDB0353	
431-433	3	Legal Plan Coverage Code	EDB0354	
434-439	6 (yymmdd)	Legal Plan Coverage Effective Date	EDB0355	
440-442	3	Federal Tax Withholding Allowances	EDB0128	
443-445	3	State Tax Personal Withholding Allowances	EDB0131	
446-448	3	State Tax Itemized Deduction Withholding Allowances	EDB0132	
449	1	Executive Life Insurance Indicator	EDB0356	
450-452	3	Executive Life Insurance Salary Base	EDB0357	

⁶ If EDB0103 (Last Action Date) is equal to current month and EDB0260 (Month pay indicator) is equal to 'Y' or EDB2028 (Appointment Without Salary Indicator) is 'Y' or if the employee is on Leave of Absence then 'C', else blank.

⁷ Derived from GTN #245
if 6245G has a deduction in it, then 'Y'
if no deduction then 'N'

⁸ Derived from GTN #253
if 6253G has a deduction in it, then 'Y'
if no deduction then 'N'.

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Position	Length/ Format	Field Description	Data Element #	Comments
453	1	Benefits Eligibility Level Indicator	EDB0360	
454	1	Benefits Eligibility Level Indicator Derived	EDB0375	
455-458	4 (yymm)	Benefits Eligibility Level Indicator Conflict Date	EDB0376	
459	1	Medical Insurance Opt Out Code	EDB0377	
460	1	Dental Insurance Opt Out Code	EDB0378	
461	1	Vision Insurance Opt Out Code	EDB0379	
462-465	4	Average Hours Worked Per Week	EDB5132	
466-471	6 (yymmdd)	Dependent Life Coverage Effective Date	EDB0188	
472-480	9	Total Gross YTD	EDB5501	
481-489	9	Federal Withholding Tax Gross YTD	EDB5502	
490-498	9	DepCare FSA Year-To-Date	EDB6227Y	
499-507	9	Hours Toward Career Status Eligibility – Total	EDB0426	
508-516	9	Hours Toward Benefits Eligibility – Total	EDB5142	
517-522	6	Last Day On Pay Status	EDB0189	
523-525	3	SLCG Grade Level	EDB0388	
526-531	6 (yymmdd)	SLCG Effective Date	EDB0389	
532-606	75	Filler		
607	1	Supplemental Disability Indicator		See footnote ⁹
608-610	3	Supplemental Disability Waiting Period	EDB0231	
611-615	5	Supplemental Disability Salary Base	EDB0232	
616-621	6 (yymmdd)	Supplemental Disability Coverage Effective Date	EDB0233	
622-625	4	Primary Title Code	EDB0460	
626-631	6	START Begin Date	EDB0496	
632-637	6	START End Date	EDB0497	
638-643	6 (yymmdd)	Short Term Disability Coverage Effective Date	EDB0453	
644-652	9	Federal Withholding Tax	EDB5545	

⁹ Derived from EDB0233

If EDB0233 has a valid date (i.e., date greater than 01/01/0001, then 'Y', else 'N').

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Position	Length/ Format	Field Description	Data Element #	Comments
		Gross – FYTD		
653-658	6	Home Department Code	EDB0114	
659-688	30	Home Department Name	EDB0114	From the Home Department Table
689-690	2	Country of Residency Code	EDB0143	
691-720	30	Country of Residency	EDB0143	From the Foreign Country Table
721	1	Health FSA Reimbursement Account Indicator		See footnote ¹⁰
722-726	5	Health FSA Annual Amount	EDB6226U	
727-732	6 (yymmdd)	Health FSA Termination Date	EDB0314	
733-741	9 9(07)V99	Health Year-To-Date Deductions	EDB6226Y	
742-746	5	DepCare FSA Annual Amount	EDB6227U	
747-752	6 (yymmdd)	DepCare FSA Termination Date	EDB0315	
753	1	Foreign Address Indicator	EDB0291	
754-768	15	Foreign Address – Province	EDB1120	
769-778	10	Foreign Address – Postal Code	EDB1119	
779-808	30	Foreign Address – Country	EDB1118	
809-900	92	Filler		

¹⁰ Derived from GTN #226
if 6226G is greater than zero, then ‘Y’
otherwise ‘N’.