PERSONNEL ACTION FORM

LAST NAME	FIRST NAME, MIDDLE INITIAL	EMPLOYEE NO.	EFFECTIVE DATE	**POSITION CONTROL #** (H.R. USE ONLY)

	FUNCTION (SUBDEPT)	OCC CODE	JOB CLASSIFICATION/TITLE
CURRENT			
PROPOSED			

	BI-WEEKLY BASE	STEP/RANGE	TOTAL SALARY (BI-WEEKLY BASE + Incentive Pay)	**ACTUAL** (H.R. USE ONLY) BASE HOURLY	INCREMENT	BI-WEEKLY
CURRENT						
PROPOSED						

	% (100) GEN	% (250) HCD	% (390) RDA	% (400) WATER	% (450) SEWER	% (500) EQUIP	% (000) OTHER
FUNDING							

ACTIONS

- ☐ NEW HIRE
- ☐ RE-HIRE
- ☐ END OF PROBATION
- ☐ MERIT (PAR REQUIRED)
- ☐ PROMOTION
- ☐ DEMOTION
- ☐ TRANSFER
- ☐ ACTING APPOINTMENT
- ☐ END ACTING APPOINTMENT
- ☐ ADMINISTRATIVE LEAVE
- ☐ LEAVE WITHOUT PAY
- ☐ LEAVE OF ABSENCE
- ☐ REINSTATEMENT FROM LEAVE
- ☐ WORK SCHEDULE CHANGE

STATUS

- ☐ FULL TIME REGULAR
- ☐ PART TIME REGULAR – HRS PER WK _____
- ☐ FULL TIME TEMPORARY
- ☐ PART TIME TEMPORARY – HRS PER WK _____
- ☐ TEMPORARY (BENEFITTED)

SEPARATION

- ☐ RETIREMENT
- ☐ RELEASE FROM PROBATION
- ☐ TERMINATION
- ☐ RESIGNATION W/NOTICE (attach notice)
- ☐ RESIGNATION W/O NOTICE

LAST DAY OF WORK _____

ELIGIBLE FOR REHIRE: YES ☐ NO ☐

NO? : _____

SAME	ADD	DELETE	MISCELLANEOUS PAYS
☐	☐	☐	HL - HOLIDAY-IN-LIEU PAY 6%
☐	☐	☐	CD – CAREER DEVELOPMENT 6%
☐	☐	☐	E5 – INTERMEDIATE POST 5%
☐	☐	☐	E7 – ADVANCED POST 7.5%
☐	☐	☐	K9 – CANINE 5%
☐	☐	☐	SW – SWAT 5%
☐	☐	☐	MC – MOTORCYCLES 5%
☐	☐	☐	HM – HAZ MAT SPECIALIST 6%
☐	☐	☐	BL – BI-LINGUAL 2.5%
☐	☐	☐	S5 – SPECIAL ASSIGNMENT 5%
☐	☐	☐	SA – SPECIAL ASSIGNMENT 10%
☐	☐	☐	15 – SPECIAL ASSIGNMENT 15%
☐	☐	☐	S2 – SHIFT DIFFERENTIAL 2.5%
☐	☐	☐	SD – SHIFT DIFFERENTIAL 5%
☐	☐	☐	C4 – CERTIFICATIONS 4%
☐	☐	☐	CC – CA WATER CERTIFICATE 4%
☐	☐	☐	LG – LONGEVITY 0.5%
☐	☐	☐	LH – LONGEVITY 1%
☐	☐	☐	LI – LONGEVITY 1.5%
☐	☐	☐	LA – LONGEVITY 3%
☐	☐	☐	LB – LONGEVITY 5%
☐	☐	☐	LC – LONGEVITY 7%
☐	☐	☐	LD – LONGEVITY 8.2%
☐	☐	☐	LE – LONGEVITY 10.5%
☐	☐	☐	LF – LONGEVITY 15.1%
☐	☐	☐	C2 – CONFIDENTIAL 2%
☐	☐	☐	C5 – CONFIDENTIAL 5%
☐	☐	☐	943-UNIFORM ALLOWANCE
☐	☐	☐	OTHER: _____

COMMENTS: _____

APPROVALS

SUPERVISOR: _____ DATE: _____

DEPARTMENT HEAD: _____ DATE: _____

HUMAN RESOURCES DIRECTOR: _____ DATE: _____

CITY MANAGER: _____ DATE: _____

HR USE ONLY

- ☐ POS CONTROL
- ☐ DISTRIBUTION
- ☐ TIME BANKS
- ☐ EMERGENCY CONTACT
- ☐ DEPENDENTS
- ☐ WORK PERMIT
- ☐ DRIVER'S LICENSE
- ☐ PAR REPORT
- ☐ ☐ PERSON # _____
- ☐ ☐ POSITION # _____
- ☐ ☐ EMPLOYEE REQUEST # _____
- ☐ ☐ TRANSFER REQUEST # _____
- ☐ ☐ NEW HIRE REQUEST # _____
- ☐ ☐ TERMINATION REQUEST # _____
- ☐ ☐ OTHER: _____
- ☐ ☐ HEADCOUNT & VACANCY REPORTS ☐
- ☐ 1000 HOURS
- ☐ TERMINATION
- ☐ FLOATING HOLIDAY
- ☐ TEMP TO PERM
- ☐ STATUS CHANGE
- ☐ PARS TO PERS
- ☐ RETRO
- ☐ PSCR # _____
- ☐ CANINE
- ☐ UNIFORM
- ☐ FINGERPRINTS / WORK PERMIT
- ☐ PULL I-9 FORM ☐
- ☐ REMOVE FROM DOJ ☐
- ☐ REMOVE FROM DMV ☐
- ☐ PERS: YES ☐ NO ☐
- ☐ DOT: YES ☐ NO ☐