



## Personnel Action Request Form

Employee Information:					
Last Name:		First Name:		Middle Initial:	
<b>Action Requested:</b>	<input type="checkbox"/> New Hire <input type="checkbox"/> Transfer <input type="checkbox"/> Promotion <input type="checkbox"/> Demotion	<input type="checkbox"/> Status Change <input type="checkbox"/> Acting Pay <input type="checkbox"/> Salary Change <input type="checkbox"/> Reallocation	<input type="checkbox"/> Separation (select reason below): <input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/> Discharge <input type="checkbox"/> Layoff Resigned in good standing: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Effective Date:					
Position Information:					
Department:			Manager:		
Position Title:			Department Code:		Object Code:
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Exempt <input type="checkbox"/> Non-exempt					
Requested Salary:			Grade:		Step:
Salary Justification: (Complete this section only if requested salary is above Step A)					
Use this space to support the salary requested. Factors to consider may include but are not limited to business need; performance; work experience; knowledge, skills, and abilities; relevant training, certifications and licenses; internal salary alignment; and market availability.					
Approvals:					
_____ Hiring Supervisor/Manager (All actions)			_____ Date		
_____ Division Chief (All actions)			_____ Date		
_____ Division Chief, Finance & General Services (Salary changes only)			_____ Date		
_____ Human Resources Director (All actions)			_____ Date		
_____ County Administrator (Salary changes & terminations only)			_____ Date		