# 7.GIF

PERSONNEL ACTION

|  |  |  |
| --- | --- | --- |
| Employee Name: | Social Security #: | |
| Program: | Project: | |
| Type of Action: | Effective Date: | |
| Employee’s Present Title: | Wage Per Hour: $ | Type: |
| Grade: | Step: |
| Employee’s New Title: | Wage Per Hour: $ | Type: |
| Explanation: | Grade: | Step: |
| County of Jobsite: | |

|  |  |  |  |
| --- | --- | --- | --- |
| Statistics: | Split Pay: | Yes | No |
| Sex:  Male  Female | Contract #: | % | |
| FLSA:  Exempt  Non-Exempt | Contract #: | % | |
| Race: | Contract #: | % | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Attachments Check List \**copy to employee*** | | | | | |
| **Accounting/Stapled** | | **Other** | | **Medical/Stapled** | |
|  | Personnel Action |  | Preliminary Job Offer |  | Job Related Disabilities |
|  | ***\*Letter of Assignment*** |  | Application |  | Drug Free Workplace |
|  | I-9 |  | References |  | Release - Drug Testing |
|  | W-4 |  | Employment or Vol. Declaration |  | Physical/TB (if applicable) |
|  | Withholding |  | Fidelity Bond (if applicable) |  | Emergency Contact Information? |
|  | Applicable Insurances |  | NC New Hire Reporting Form |  | Other: |
|  | Retirement |  | Program Specific Information |  | Other: |
|  | Direct Deposit Form |  | ***\*Job Description*** |  | Other: |
|  | Other: |  | ***\*Job Position and Work Site Hazards*** |  | Other: |
|  | Other: |  | ***\*Standards of Conduct*** |  | Other: |
|  | Other: |  | ***\*Bloodborne Pathogens Forms*** |  | Other: |
|  | Other: |  | ***\*Career Development Plan*** |  | Other: |
|  | Other: |  | Welcome Aboard Employee Orientation |  | Other: |
|  | Other: |  | Post Employment Data Record |  | Other: |

|  |  |  |  |
| --- | --- | --- | --- |
| Types of Actions to be reported include:   * Adverse (Verbal Warning, Written Warning, Final Written Warning, Suspension Subject to Termination) * Change in Work Hours * Commendation * Leave of Absence or FMLA * New Hire * Outside Employment * Pay Increase: Merit/Promotion/Longevity/Edu. * Program Transfer * Reduction in Force or Work Hours * Recall: School Year Beginning * Separation School Year Ending/Recall * Termination (Voluntary or Involuntary) | Approvals: | Signature | Date |
| *Supervisor* |  |  |
| *Program Director* |  |  |
| *Executive Director* |  |  |
| *Executive Assistant Log In* |  |  |
| *Acct. Set-Up* |  |  |
| *HR Director* |  |  |

1/2012 dr