



PERSONNEL ACTION REQUEST
Southeastern California Conference of Seventh-day Adventists

(Office Use)

Employee #: _____

EMPLOYEE INFO

Employee Name _____
 Work Location: _____ Name of Supervisor: _____
 Effective Date: _____ Job Title: _____
 Supervisory Position: Yes No New Position (Include Job Description)

NEW

REHIRE

Full-Time Part-Time On-Call Regular Temporary (3 Month Maximum)
 Hours/Week or FTE: _____ Ending Date (if applicable): _____ Rate of Pay: _____ Hourly Biweekly*
 Comments: _____

 *Biweekly salary paid only under specific terms. **Must be pre-approved through HR before offering to candidate**

CHANGE

ADDITIONAL ASSIGNMENT

New Work Location: _____ New Hours/Week or FTE: _____
 New Job Title: _____ New Rate of Pay: _____
 Status Change: Full-Time Part-Time Regular On-Call LTD Temporary: (Ending Date: _____)
 Other: _____
 Comments: _____

TERMINATION

SETTLEMENT

Resignation (attach letter) Reduction-In-Force Dismissal Retirement
 Other: _____ Vacation Cash Out Due: _____
 Comments: _____

In addition to the wages, there are other employment expenses. HR assumes no responsibility for budget calculations.

Supervisor: _____ (Signature) _____ (Print) Date: _____

Department Head: _____ (Signature) _____ (Print) Date: _____

TO BE COMPLETED BY HUMAN RESOURCES:

Sick Bank _____ Sick/Vacation Accrual Retirement Medical HCAP Auto Subsidy Cell Phone LTD

FTE: _____ Remuneration: _____ Cost Area: _____ Travel: _____

Charge to: _____ Work Comp Code: _____

Approved Not Approved Date: _____ Ad Com Executive Committee Other: _____

Comments: _____

Audited by: _____ Date: _____

Human Resources Director

Date

HR Payroll Office of Ed