


<b>CITY OF BEXLEY PERSONNEL ACTION FORM</b>						<input type="checkbox"/> NEW EMPLOYEE <b>510</b> <input checked="" type="checkbox"/> CHANGE			
<b>NAME:</b> <b>Lauren Miller</b>						<b>EFFECTIVE DATE:</b> <b>1.1.24</b>			
<b>ADDRESS</b>									
FROM:				TO:					
<b>PAYROLL NUMBER</b>	<b>SEX</b>	<b>DOB</b>	<b>PRIOR SERVICE</b>	<b>PRIOR SICK LEAVE</b>	<b>EDUCATION</b>		<b>DEGREE:</b>		
					YEARS:				
<b>DEPARTMENT, UNIT</b> FROM: <b>Recreation &amp; Parks Department</b>									
<b>OR OFFICE</b> TO:									
<b>CLASS TITLE</b> FROM: <b>Rec Coordinator Tier I</b> TO: <b>Event &amp; Facility Manager</b>				<b>CLASS NUMBER</b> FROM: TO:					
<b>RANGE</b> FROM: TO:				<b>STEP</b> FROM: <b>Step 5,</b> TO: <b>year 2</b>		<b>RATE</b> FROM: <b>\$33.63/hr. / \$69,946/yr</b> TO:			
<b>APPOINTMENT</b>		<b>CHANGE</b>		<b>SEPARATION</b>		<b>INTERRUPTION</b>			
<input type="checkbox"/> 1 – EMERGENCY Ends: _____ <input type="checkbox"/> 2 – FULL TIME (Permanent or Provisional) <input type="checkbox"/> 3 – FULL TIME (Temporary) <input type="checkbox"/> 4 – PART TIME (Permanent) <input type="checkbox"/> 5 – PART TIME (Temporary) <input type="checkbox"/> 6 – <b>PART TIME (Seasonal)</b> _____ TO _____ <input type="checkbox"/> 7 – APPOINTMENT DATE CORRECTED <input type="checkbox"/> 8 – INTERIM <input type="checkbox"/> 9 – OTHER _____ _____		<input type="checkbox"/> 1 – PROMOTIONAL <input type="checkbox"/> 2 – DEMOTION <input type="checkbox"/> 3 – LATERAL CLASS. <input type="checkbox"/> 4 – TRANSFER WITHIN DEPT. <input type="checkbox"/> 5 – TRANSFER BETWEEN DEPTS. <input type="checkbox"/> 6 – CIVIL SERVICE STATUS <input type="checkbox"/> 7 – NAME <input type="checkbox"/> 8 – APPOINTMENT CHANGE TO: _____ <input type="checkbox"/> 9 – RATE <input type="checkbox"/> 10 – REASSIGNMENT <input type="checkbox"/> 11 – POSITION NUMBER <input checked="" type="checkbox"/> 12 – OTHER: (see remarks) <input type="checkbox"/> 13- TEMP WORK LEAVE ADJUSTMENT <input type="checkbox"/> 14 – CORRECTION OF: _____		<input type="checkbox"/> 1 – RETIRED <input type="checkbox"/> 2 – DISABILITY RETIREMENT <input type="checkbox"/> 3 – DECEASED <input type="checkbox"/> 4 – REMOVED <input type="checkbox"/> 5 – PROBATIONARY <input type="checkbox"/> 6 – LAID OFF <input type="checkbox"/> 7 – UNCLASSIFIED <input type="checkbox"/> 8 – OTHER (see remarks) <input type="checkbox"/> 9 – CANCEL APPOINTMENT		<input type="checkbox"/> 1 – MILITARY LEAVE <input type="checkbox"/> 2 – PERSONAL LEAVE <input type="checkbox"/> 3 – SUSPENSION <input type="checkbox"/> 4 – DISABILITY <input type="checkbox"/> 5 – SEASONAL END <input type="checkbox"/> 6 – MATERNITY <input type="checkbox"/> 7 – EDUCATIONAL <input type="checkbox"/> 8 – SICK LEAVE END DATE: _____ <input type="checkbox"/> 9 – VACATION LEAVE END DATE: _____		<input type="checkbox"/> 1 – FROM SEPARATION <input type="checkbox"/> 2 – FROM INTERRUPTION <input type="checkbox"/> 3 – BY CIVIL SERVICE ORDER <input type="checkbox"/> 4 – BY COURT ORDER <input type="checkbox"/> 5 – RESCIND SEPARATION	
<b>DATE LAST PROMOTED:</b>			<b>DATE CONTINUOUS SERVICE:</b>			<b>CERTIFICATION #:</b>			
<b>BUDGETED HOURS</b>			<b>REMARKS:</b> <b>New Title and pay scale - Starting 2024 at Step 5, year 2</b>						
<b>APPROVAL OF APPOINTING AUTHORITY</b>				<b>CIVIL SERVICE COMMISSION</b>					
SIGNATURE: 		DATE: <b>1/3/24</b>		<input type="checkbox"/> APPROVED CERTIFICATION _____ <input type="checkbox"/> DISAPPROVED					
<b>RELEASING AUTHORITY:</b>				SIGNATURE: _____ DATE: _____					
SIGNATURE: _____		DATE: _____		EXECUTIVE SEC. CIVIL SERVICE COMM.					
<b>Original to Civil Service Commission; Copies to Employee Personnel File; Auditor/Treasurer; Department Head</b>									