

**CITY OF BEXLEY
PERSONNEL ACTION FORM**

☐ NEW EMPLOYEE

☐ CHANGE

NAME: Garvin Howard

EFFECTIVE DATE: 6-26-2024

DEPARTMENT Service

FROM: Streets **TO:**

ADDRESS

FROM: **TO:**

SEX	DOB	BUDGETED HOURS	PRIOR SERVICE	SICK LEAVE CREDITED	BEGINNING VACATION BALANCE

JOB TITLE

FROM: Equipment Operator II **TO:** Equipment Operator II

RANGE

FROM: **TO:**

STEP **RATE**

FROM: 4 **TO:** 5 **FROM:** \$29.15 **TO:** \$31.51

DATE LAST PROMOTED **DATE CONTINUOUS SERVICE** **RIGHTSTUFF - Copy access permissions from:**

BENEFITS ELIGIBILITY

SELECT ELIGIBILITY

APPOINTMENT	CHANGE	SEPARATION	INTERRUPTION	REINSTATEMENT
<input type="checkbox"/> FULL TIME - Permanent <input type="checkbox"/> FULL TIME - Seasonal or temp to _____ <input type="checkbox"/> PART TIME- Permanent <input type="checkbox"/> PART TIME- Seasonal or temp to _____ <input type="checkbox"/> INTERIM <input type="checkbox"/> EMERGENCY Ends _____ <input type="checkbox"/> OTHER (Note in remarks)	<input checked="" type="checkbox"/> PROMOTION <input type="checkbox"/> DEMOTION <input type="checkbox"/> LATERAL <input type="checkbox"/> TRANSFER <input type="checkbox"/> RATE <input type="checkbox"/> CIVIL SERVICE STATUS <input type="checkbox"/> EMPLOYEE INFO CHANGE (Note in remarks) <input type="checkbox"/> CORRECTION (Note in remarks)	<input type="checkbox"/> RESIGNATION <input type="checkbox"/> RETIREMENT <input type="checkbox"/> DISABILITY RETIREMENT <input type="checkbox"/> REMOVAL <input type="checkbox"/> LAID OFF <input type="checkbox"/> PROBATIONARY <input type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> DEATH <input type="checkbox"/> OTHER (Note in remarks)	<input type="checkbox"/> MILITARY LEAVE <input type="checkbox"/> LEAVE OF ABSENCE TO _____ <input type="checkbox"/> SUSPENSION <input type="checkbox"/> SEASONAL END <input type="checkbox"/> OTHER (Note in remarks)	<input type="checkbox"/> FROM SEPARATION <input type="checkbox"/> FROM INTERRUPTION <input type="checkbox"/> BY CIVIL SERVICE ORDER <input type="checkbox"/> BY COURT ORDER <input type="checkbox"/> RESCIND SEPARATION <input type="checkbox"/> OTHER (Note in remarks)
REMARKS:				

APPROVAL OF APPOINTING AUTHORITY:

SIGNATURE: [Signature] **DATE:** 6-21-24

CIVIL SERVICE COMMISSION

APPROVAL OF RELEASING AUTHORITY:

SIGNATURE: [Signature] **DATE:** 6/21/24

DATE REVIEWED:

SIGNATURE:

ORIGINAL TO PERSONNEL FILE; COPIES TO: HR, FINANCE DEPT, CIVIL SERVICE COMMISSION