

**CITY OF BEXLEY  
PERSONNEL ACTION FORM**

☐ NEW EMPLOYEE

☒ CHANGE

**NAME:** Amelia Wright

**EFFECTIVE DATE:**

9-2-2024

**DEPARTMENT** Service / Parks

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**ADDRESS**

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

<b>SEX</b>	<b>DOB</b>	<b>BUDGETED HOURS</b>	<b>PRIOR SERVICE</b>	<b>SICK LEAVE CREDITED</b>	<b>BEGINNING VACATION BALANCE</b>

**JOB TITLE** Service Worker

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_

**RANGE**

**FROM:** #18.50 **TO:** \_\_\_\_\_

**STEP** 3 **RATE** \_\_\_\_\_

**FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_ **FROM:** #21.31 **TO:** \_\_\_\_\_

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

**BENEFITS ELIGIBILITY**

**SELECT ELIGIBILITY**

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

**REMARKS:**

**APPROVAL OF APPOINTING AUTHORITY:**

**SIGNATURE:** [Signature] **DATE:** \_\_\_\_\_

**CIVIL SERVICE COMMISSION**

**APPROVAL OF RELEASING AUTHORITY:**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**DATE REVIEWED:** \_\_\_\_\_  
**SIGNATURE:** \_\_\_\_\_