

**CITY OF BEXLEY
PERSONNEL ACTION FORM**

NEW EMPLOYEE

CHANGE

NAME: Mindy Walsh

EFFECTIVE DATE: 8.1.24

DEPARTMENT

FROM: 526 and 580 TO: 510

ADDRESS

FROM: TO:

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

JOB TITLE

FROM: Childcare Administrator TO:

RANGE

FROM: 48,424 TO:

STEP

FROM: Step 1, Year 1

RATE

FROM: \$ 23.28

DATE LAST PROMOTED	DATE CONTINUOUS SERVICE	RIGHTSTUFF - Copy access permissions from:	BENEFITS ELIGIBILITY
		Lauren Miller	Full Time - Eligible

APPOINTMENT	CHANGE	SEPARATION	INTERRUPTION	REINSTATEMENT
<input checked="" type="checkbox"/> FULL TIME - <i>Permanent</i> <input type="checkbox"/> FULL TIME - <i>Seasonal or temp</i> to _____ <input type="checkbox"/> PART TIME- <i>Permanent</i> <input type="checkbox"/> PART TIME- <i>Seasonal or temp</i> to _____ <input type="checkbox"/> INTERIM <input type="checkbox"/> EMERGENCY Ends _____ <input type="checkbox"/> OTHER (Note in remarks)	<input 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:
Current employee, hired full time 8.1.24. Retro pay is needed for 8.1.24-9.1.24 for the number of hours worked at the difference of her PT rate. Overtime hours paid out should also be compensated.

APPROVAL OF APPOINTING AUTHORITY:

SIGNATURE:  DATE: 9/5/24

CIVIL SERVICE COMMISSION

APPROVAL OF RELEASING AUTHORITY:

SIGNATURE: DATE:

DATE REVIEWED:

SIGNATURE:

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