

CITY OF BEXLEY
PERSONNEL ACTION FORM

NEW EMPLOYEE

CHANGE

NAME: **Jonathan Bower**

EFFECTIVE DATE: **7-19-2024**

DEPARTMENT: **Service Department**

FROM: _____ TO: _____

ADDRESS

FROM: _____ TO: _____

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

JOB TITLE

RANGE: FROM: **Equipment Operator 1** TO: _____

STEP: FROM: _____ TO: _____

DATE LAST PROMOTED: FROM: **5** TO: **5** RATE: **\$ 29.87**

DATE CONTINUOUS SERVICE: _____ RIGHTSTUFF - Copy access permissions from: _____

APPOINTMENT CHANGE SEPARATION INTERRUPTION REINSTATEMENT

<input type="checkbox"/> FULL TIME - Permanent	<input type="checkbox"/> PROMOTION	<input checked="" 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 checked="" type="checkbox"/> REMOVAL	<input type="checkbox"/> LAID OFF	<input type="checkbox"/> BY COURT ORDER
<input type="checkbox"/> PART TIME- Permanent	<input type="checkbox"/> RATE	<input type="checkbox"/> PROBATIONARY	<input type="checkbox"/> SEASONAL END	<input type="checkbox"/> RESCIND SEPARATION
<input type="checkbox"/> PART TIME- Seasonal or temp to _____	<input type="checkbox"/> CIVIL SERVICE STATUS	<input type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> OTHER (Note in remarks)	<input type="checkbox"/> OTHER (Note in remarks)
<input type="checkbox"/> INTERIM	<input type="checkbox"/> EMPLOYEE INFO CHANGE (Note in remarks)	<input type="checkbox"/> DEATH	REMARKS:	
<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> CORRECTION (Note in remarks)	<input type="checkbox"/> OTHER (Note in remarks)		
<input type="checkbox"/> OTHER (Note in remarks)				

APPROVAL OF APPOINTING AUTHORITY:

SIGNATURE: *[Signature]* DATE: **7-19-24**

CIVIL SERVICE COMMISSION

APPROVAL OF RELEASING AUTHORITY:

SIGNATURE: *[Signature]* DATE: **7/19/24**

DATE REVIEWED:

SIGNATURE:

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