

EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

4-16-15

Shawn McIntosh
Employee's Name
Director
Employee's Position
OTM
Location

Today's Date
Employee ID Number
Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s)

Administrator's Signature

Employee's Signature

001100 2570 6111 503
Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range
Step/Cell
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date
Board Date

Grade/Range
Step/Cell
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date
Assistant Superintendent / Director of Human Resources

COMMENTS:

APPROVED

MSM

Finance Dept.

EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

4-16-15

Susan Cadena
Employee's Name

Today's Date
[Redacted]
Employee ID Number

Employee's Position

Location

Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s)

Administrator's Signature

Employee's Signature

001 100 2105 6166 505-30%
100 100 2590 6166 505-70%
Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range
Step/Cell
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date

Grade/Range
Step/Cell
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date

Board Date
COMMENTS:

G.T. Vardone
Assistant Superintendent / Director of Human Resources

WOM

EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

4-16-15

Missy Udall

Employee's Name

Today's Date

Employee ID Number

Director

Employee's Position

CTM

Location

Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

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- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s)

Administrator's Signature

Employee's Signature

001 100 2570 6111 503

Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range _____
Step/Cell _____
Salary _____
Job Code _____
Criteria Code _____
Account Code _____
Sub Location _____
Hours per Day/Week _____
Effective Date _____

Grade/Range _____
Step/Cell _____
Salary _____
Job Code _____
Criteria Code _____
Account Code _____
Sub Location _____
Hours per Day/Week _____
Effective Date _____

A. T. Anderson
Assistant Superintendent / Director of Human Resources

Board Date

COMMENTS:

APPROVED

Finance

EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

4-16-15

Derek Skutnik

Employee's Name

Today's Date

Employee ID Number

Employee's Position

Location

Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s)

Administrator's Signature

Employee's Signature

001100 2621 6179506
Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range

Step/Cell

Salary

Job Code

Criteria Code

Account Code

Sub Location

Hours per Day/Week

Effective Date

Board Date

COMMENTS:

Grade/Range

Step/Cell

Salary

Job Code

Criteria Code

Account Code

Sub Location

Hours per Day/Week

Effective Date

G. T. Nardone
Assistant Superintendent / Director of Human Resources



EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

4-16-15

Ward Heinemann

Today's Date
[Redacted]

Employee's Name

Location

Employee ID Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s)

Administrator's Signature

Employee's Signature

001 100 2580 6179 516
Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range _____

Step/Cell _____

Salary _____

Job Code _____

Criteria Code _____

Account Code _____

Sub Location _____

Hours per Day/Week _____

Effective Date _____

Board Date _____

Grade/Range _____

Step/Cell _____

Salary _____

Job Code _____

Criteria Code _____

Account Code _____

Sub Location _____

Hours per Day/Week _____

Effective Date _____

[Signature]
Assistant Superintendent / Director of Human Resources

COMMENTS:

EMPLOYEE ACTION REQUE
(Press Firmly or Type)

4-16-15

Irene Mahoney-Paige

Today's Date
Employee ID Number

Employee's Position Location Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s)

Administrator's Signature

Employee's Signature

527 100 2560 6170 501
Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range
Step/Cell
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date

Grade/Range
Step/Cell
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date

Board Date
COMMENTS:

A. T. Mahoney
Assistant Superintendent / Director of Human Resources

1/1/15
MCM



EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

5/3/16

Jonathan Castelhana
Employee's Name
Executive Director of Technology - 247 days
Employee's Position
Technology
Location

Today's Date
Employee ID Number
Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: Stipend

REMARKS:

Travel Stipend of \$3,000 for the 2016-17 school year

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete)
- Replacement For:
- Change in Hours From: To:
- Successful Completion of Probationary Period
- Extended Until:

July 1, 2016

Effective Date(s)

Administrator's Signature

Employee's Signature

001.100.2580.6120.516

Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range
Step/Cell
\$3,000
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date

Grade/Range
Step/Cell
Salary
Job Code
Criteria Code
Account Code
Sub Location
Hours per Day/Week
Effective Date

Board Date
COMMENTS:

APPROVED

JUN 21 2016

Finance Dept.

RECEIVED

MAY 03 2016

Assistant Superintendent / Director of Human Resources

OFFICE OF TALENT MGMT.

White/Yellow/Pink: Personnel Gold: Originator

Revised 4/06



EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

4-16-15

Teddy Dumlao
Employee's Name

Today's Date
[Redacted]

Employee's Position _____ Location _____

Employee's Home Phone Number _____

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s) _____

Administrator's Signature _____

Employee's Signature _____

001100 2510 6160 502
Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range _____

Step/Cell _____

Salary _____

Job Code _____

Criteria Code _____

Account Code _____

Sub Location _____

Hours per Day/Week _____

Effective Date _____

Grade/Range _____

Step/Cell _____

Salary _____

Job Code _____

Criteria Code _____

Account Code _____

Sub Location _____

Hours per Day/Week _____

Effective Date _____

Board Date
COMMENTS:

[Signature]
Assistant Superintendent / Director of Human Resources

10/11



EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

4-16-15

Debbie McCarron

Today's Date

Employee ID Number

Employee's Position

Location

Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Change days from 247 to 237 days.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete) _____
- Replacement For: _____
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

Effective Date(s)

Administrator's Signature

Employee's Signature

510 100 3100 6160 508
Account Code

Full-Time: Yes No
Position 1: Add Inactivate Change

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range

Step/Cell

Salary

Job Code

Criteria Code

Account Code

Sub Location

Hours per Day/Week

Effective Date

Board Date

COMMENTS:

Grade/Range

Step/Cell

Salary

Job Code

Criteria Code

Account Code

Sub Location

Hours per Day/Week

Effective Date

A.T. Anderson
Assistant Superintendent / Director of Human Resources

MM



EMPLOYEE ACTION REQUEST

3/18/15

Today's Date

Employee ID Number

Employee's Home Phone Number

Jason C. Martin

Employee's Name

Executive Director of Elem. Education

Employee's Position

District

Location

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: _____

REMARKS:

Pay \$89,274.00 ANNUAL SALARY

Change Vac Code to ~~VAC~~ 22 DAYS 237
VAC ADM per P.O/SZ.

ADMINISTRATIVE USE ONLY FOR EMPLOYMENT RECOMMENDATION

- New Position
- Number of Hours Per Day (Must Complete)
- Replacement For: Linda McKeever
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

7/1/15

Effective Date(s)

Administrator's Signature

Employee's Signature

001.100.2191.6111.505

Account Code

Full-Time: Yes No

Position 1: Add Inactivate Change

DIRLING

Grade/Range

12

Step 90

Step

\$89,274.00

Salary

Job Code

Criteria Code

Account Code

05A/301

Sub Location

Hours per Day/Week

Effective Date

7/1/15

Board Date

COMMENTS:

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range

Step

Salary

Job Code

Criteria Code

Account Code

Sub Location

Hours per Day/Week

Effective Date

Assistant Superintendent / Director of Human Resources