

EMPLOYEE ACTION REQUIRE
(Press Firmly or Type)

5/29/14

Today's Date

Employee's Name MISSY MOALL

Employee ID Number

Employee's Position DIRECTOR Location HR

Employee's Home Phone Number

REQUEST FOR: (check one)

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

REMARKS:

PER DR. RICE, MISSY'S 13/14 CONTRACT WILL BE EXTENDED THROUGH 6/20/14. PAY ADDITIONAL ~~\$ 2,826~~ \$ 3,202.80

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) 5/29/14

Administrator's Signature [Signature]

Employee's Signature [Signature]

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 DAILY RATE = \$ 376.80
Salary EXTENDED DAYS = 8.5
Job Code _____
Criteria Code ADDITIONAL PAY = \$ 2,826.00
Account Code + 376.80
Sub Location _____
Hours per Day/Week \$ 3,202.80
Effective Date _____

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

Board Date
COMMENTS:

Assistant Superintendent / Director of Human Resources [Signature]