

EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

3/2/16

Employee's Name: SHAWN MCINTOSH
 Employee's Position: DIR OTM
 Location: DO

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

- REQUEST FOR:** (check one)
- New Employee
 - Employee Transfer/Change
 - Job Resignation
 - Other: _____

REMARKS:

DISTRICT MILLAGE STOPPED FOR 2016-17 DUE TO THE FIELD-BASED
 OTM MODEL PER DR. KUSHMAN

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: _____
 Account Code: 001.100.2570.611.503

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: \$3,000
 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

RECEIVED

MAR 21 2016

Assistant Superintendent / Director of Human Resources

JUN 21 2016

OFFICE OF TALENT MGMT.

White/Yellow/Pink: Personnel Gold: Originator
 Finance Dept.

EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

3/2/16

Employee's Name: MISSY UDALL
Employee's Position: Dir OTM Location: DO

Today's Date: 3/2/16
Employee ID Number: [REDACTED]
Employee's Home Phone Number: _____

- REQUEST FOR:** (check one)
- New Employee
 - Employee Transfer/Change
 - Job Resignation
 - Other: _____

REMARKS:
DISTRICT MILEAGE STAND FOR 2016-17 DUE TO THE OTM FIELD-BAND MODEL PER DR. KISHIMOTO

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 [Signature]
6120

Account Code 001.100.2570.611.503

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 \$3,000-

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 _____

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MAR 02 2016

APPROVED
JUN 21 2016
Finance Dept.

OFFICE OF TALENT MGMT.

Board Date
COMMENTS:

Assistant Superintendent / Director of Human Resources



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

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

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MAY 03 2016

Assistant Superintendent / Director of Human Resources

OFFICE OF TALENT MGMT.

Board Date
COMMENTS:

EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

JASON MARTIN
Employee's Name
EXEC DIR EDUC ED
Employee's Position
DO
Location

3/3/16
Today's Date
Employee ID Number
Employee's Home Phone Number

REQUEST FOR: (check one)

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

REMARKS:

ADD DISTRICT MILEAGE ALLOWANCE FOR 2016/17
CONTACT YEAR PER DR. KISHIMOTO

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: _____

7/1/16
Effective Date(s)
Administrator's Signature
[Signature]
Employee's Signature
001.100.2170.6120.503
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 \$3000 -
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.

Assistant Superintendent / Director of Human Resources



EMPLOYEE ACTION REQUEST
(Press Firmly or Type)

May 24, 2016

Marcie Taylor

Today's Date

Employee's Name

Employee ID Number

Executive Director of Secondary Curriculum

Academic Services

Employee's Position *237 Days*

Location

Employee's Home Phone Number

REQUEST FOR: (check one)

- New Employee
- Employee Transfer/Change
- Job Resignation
- Other: Travel 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: Brian Jaeger
- Change in Hours From: _____ To: _____
- Successful Completion of Probationary Period
- Extended Until: _____

July 1, 2016

Effective Date(s)

Administrator's Signature

Marcie Taylor

Employee's Signature

001.100.2170.6120.506

Account Code

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

HUMAN RESOURCES ONLY

Benefits: Yes No
Position 2: Add Inactivate Change

Grade/Range

Grade/Range

Step/Cell

Step/Cell

\$3,000.00

Salary

Salary

Job Code

Job Code

Criteria Code

Criteria Code

Account Code

Account Code

Sub Location

Sub Location

Hours per Day/Week

Hours per Day/Week

Effective Date

Effective Date

5/24/16

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5/26/16

APPROVED

MAY 26 2016

Assistant Superintendent / Director of Human Resources

Board Date
COMMENTS:

JUN 21 2016

OFFICE OF TALENT MGMT.

White/Yellow/Blue: Personnel Gold: Originator

Finance Dept.

Revised 4/06



EMPLOYEE ACTION REQUEST

(Press Firmly or Type)

4/27/16

Today's Date

Barbara Newman

Employee's Name

Executive Director of Curriculum

Employee's Position

Academic Services

Location

Employee ID Number

Employee's Home Phone Number

REQUEST FOR: (check one)

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

REMARKS:

\$3,000.00 Travel Stipend to be given to Ms. Newman 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: _____

7/1/16

Effective Date(s)

Administrator's Signature

Barbara Newman

Employee's 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 _____

Salary \$3,000

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: