CITY OF PETALUMA
HUMAN RESOURCES

Personnel Action Form

This form is to be completed for all new hires, change of status for current employees, terminations or resignations and re-hire of inactive or terminated employees.

1. Complete this form and send to HR for processing, with the Department Directors signature.
2. Attach back-up documentation and/or candidate materials.
3. Make effective date the first day of a pay period cycle.

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NAME:	EMPLOYEE NUMBER:
POSITION:	EFFECTIVE DATE:
DEPARTMENT:	SUPERVISOR:

REASON FOR ACTION: ☐ NEW HIRE ☐ RE-HIRE ☐ PROMOTION ☐ SEPARATION ☐ STEP INCREASE ☐ OTHER ☐ ADDITIONAL CLASS

TYPE OF APPOINTMENT: ☐ REGULAR FULL TIME ☐ TEMPORARY ☐ PROVISIONAL ☐ SEASONAL/PART TIME ☐ PART TIME

FINGERPRINTS REQUIRED: ☐ YES ☐ NO

FROM		TO	
JOB POSITION/ CLASSIFICATION		JOB POSITION/ CLASSIFICATION	
JOB CLASS		JOB CLASS	
GRADE CODE STEP (NUMERIC) PAY RATE		GRADE CODE STEP (NUMERIC) PAY RATE	
BUDGET CODE		BUDGET CODE	
OTHER/ SPECIAL PAY		OTHER/ SPECIAL PAY	

REMARKS/REASON FOR ACTION	DEPARTMENT DIRECTOR	DATE
	HUMAN RESOURCES MANAGER	DATE
	FINANCE DIRECTOR	DATE
	CITY MANAGER	DATE