

**PERSONNEL
ACTION
STATE OF OHIO**

AGENCY	DIVISION OR INSTITUTION	UNIT OR OFFICE	DATE STAMP
FROM: SAMPLE-IT	INFORMATION TECHNOLOGY	PRODUCTION MGT	
TO:			

NAME		SEX		DATE OF BIRTH			EDUCATION			
FROM: SAMPLE	JAIME			MO	DAY	YR	MARITAL STATUS	NO OF YEARS	DEGREE	MAJOR
LAST	FIRST									
TO:		U		11	27	XX		14		
ADDRESS		STREET		CITY		STATE	ZIP CODE		COUNTY	
FROM: 5555 SAMPLE AVE		SAMPLE CITY		OH		43223		SAMPLE		
TO:										
EFFECTIVE DATE		DEPARTMENT ID	POSITION NO.	UNION CODE	BARG UNIT	BU FLAG	PERM / TEMP	FULL/PART	HQ COUNTY	
FROM: 12 27 2009		SAM000111	00009090	C14	14	9	PERM	FULL	SAMPLE	
TO:										
JOB CODE TITLE		JOB CODE	GRADE	STEP	BASE RATE	LONG	SUPPL.	SUPPL.	TOTAL	STATUS
FROM: PROGRAMMER/ANALYST 3		64113	33	5	28.89	1.61	0.00	0.00	30.50	A
TO: SOFTWARE DEVELOPMENT SPECIALIST 2		69942	34	3	28.89	1.78			30.67	

NATIONAL ID/ EMPLOYEE ID 555-55-5555 REC NO 1000001

HIRE	CHANGE (DATA-POSITION-TRANSFER-PROMO-DEMOTION)	TERMINATION	LEAVES
<u>Action Reason</u> <input type="checkbox"/> HIR ETT TEMP EXT ≤ 120 ENDS _____ <input type="checkbox"/> HIR EXT TEMP EXT > 120 ENDS _____ <input type="checkbox"/> HIR PER PERMANENT <input type="checkbox"/> HIR SEA SEASONAL <input type="checkbox"/> HIR INT INTERMITTENT <input type="checkbox"/> HIR FTS FIXED TERM SALARIED <input type="checkbox"/> HIR DIM FIXED TERM PER DIEM <input type="checkbox"/> HIR EXI INTERIM EXTERNAL <input type="checkbox"/> HIR ETR ESTAB TERM REG <input type="checkbox"/> HIR ETI ESTAB TERM IRREG <input type="checkbox"/> HIR PRJ PROJECT EMPLOYEE	<u>Action Reason</u> <input type="checkbox"/> DEM DEM DEMOTION <input type="checkbox"/> DTA SCS CIVIL SERV STATUS <input type="checkbox"/> DTA APC APPT CHNG TO _____ <input type="checkbox"/> DTA XLV EXTEND LEAVE DATE <input type="checkbox"/> DTA RNP REASSIGN NO PAY IN <input type="checkbox"/> DTA RPI REASSIGN PAY INCR <input type="checkbox"/> DTA RPT REASSIGN 3 RD PTY <input type="checkbox"/> DTA TWL TEMP WORK LVL ENDS _____ JOB CODE _____ RATE _____ STEP _____ <input type="checkbox"/> DTA SVC SERVICE CHANGE <input type="checkbox"/> DTA SSN SSN CORRECTION <input checked="" type="checkbox"/> DTA DCP DAS CLASS PLAN <input type="checkbox"/> DTA ETW END TWL <input type="checkbox"/> DTA HQC HQ LOCATN CHNG <input type="checkbox"/> DTA LAT LATERAL CLASS CHG <input type="checkbox"/> DTA NAM NAME CHANGE <input type="checkbox"/> DTA DPL DISPLACEMENT <input type="checkbox"/> DTA RCD RECALL DISPLACE <input type="checkbox"/> DTA PNC POS NUM CHANGE <input type="checkbox"/> DTA TMP INTERIM INTERNAL <input type="checkbox"/> DTA TIA TEMP INT > 120 ENDS _____ <input type="checkbox"/> DTA CIM CANCEL INTERIM <input type="checkbox"/> DTA EIT END INT TEMP <input type="checkbox"/> PAY RTC RATE <input type="checkbox"/> PRO PRO PROMOTION <input type="checkbox"/> XFR TRW TRAN W/IN AGCY <input type="checkbox"/> XFR TRB TRAN BTWN AGCY	<u>Action Reason</u> <input type="checkbox"/> RET DIR DISABILITY RET <input type="checkbox"/> RET RET RETIRED <input type="checkbox"/> TER RES RESIGNED - REG _____ WRITTEN _____ ORAL <input type="checkbox"/> TER DEA DECEASED <input type="checkbox"/> TER REM REMOVED <input type="checkbox"/> TER PRB PROB REMOVAL <input type="checkbox"/> TER LOF LAID OFF <input type="checkbox"/> TER UNR UNCLAS TERM <input type="checkbox"/> TER ORM OTHER REMOVAL <input type="checkbox"/> TER CAP CANCEL APPT <input type="checkbox"/> TER DBS DISABILITY SEP NO INSURANCE REINSTATE BY _____ <input type="checkbox"/> TWP DSI DISABILITY SEP WITH INSURANCE ONLY REINSTATE BY _____ <input type="checkbox"/> TER IMS INTERIM SEP <input type="checkbox"/> TER TMP END TEMP EXT <input type="checkbox"/> TER NGS RESIGNED - NOT IN GOOD STANDING <input type="checkbox"/> TER NRR RES - NOT RECOM FOR REHIRE <input type="checkbox"/> TER EFT END FIXED TERM LAST DATE WORKED _____	<u>Action Reason</u> <input type="checkbox"/> PLA MLF MILITARY LEAVE - FEDERAL <input type="checkbox"/> PLA MLS MILITARY LEAVE - STATE <input type="checkbox"/> PLA PLB PERSONAL LV - BARG UNIT <input type="checkbox"/> PLA BEL EDUCATIONAL LV - BARG UNIT <input type="checkbox"/> PLA ETA ESTABLISHED TERM <input type="checkbox"/> PLA UNI UNION LEAVE <input type="checkbox"/> LOA EED EDUCATIONAL LV - EXEMPT <input type="checkbox"/> LOA PRS PERSONAL LV - EXEMPT <input type="checkbox"/> LOA SEI SEASONAL INTERRUPTION <input type="checkbox"/> LOA ETA ESTABLISHED TERM <input type="checkbox"/> LOA VCS VOLUNTARY COST SAVINGS <u>DISCIPLINE</u> <u>Action Reason</u> <input type="checkbox"/> SUS SUS SUSPENSION ENDS _____ <input type="checkbox"/> DTA DVD LEAVE DEBIT DAYS/HOURS _____ <input type="checkbox"/> DTA DFN PENALTY FINE DAYS/HOURS _____ <input type="checkbox"/> DTA DWS WORKING SUSP DAYS/HOURS _____ <u>RETURN FROM LEAVE</u> <u>Action Reason</u> <input type="checkbox"/> RFL RFL RETURN FROM LEAVE <input type="checkbox"/> RFL MIL RETURN FROM MILITARY <u>INITIAL PROBATIONARY PERIOD</u> <input type="checkbox"/> YES <input type="checkbox"/> NO

DATE OF LAST PROMOTION 1/7/2007	CERTIFICATION NO.	DATE OF CONTINUOUS SERVICE 3/12/1995	STANDARD HOURS 2080	ACCOUNTING INFO/BENEFITS
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REMARKS
 DAS CLASS PLAN CHANGE PER OCSEA CONTRACT 36.05B-4 - ATTACHED
 ALL ITEMS ON PRE-HIRE FORM HAVE BEEN COMPLETED

APPROVAL OF APPOINTING AUTHORITY	SIGNATURE	DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED	Certification _____
SIGNATURE OF RELEASING AUTHORITY	DATE	SIGNATURE APPROVER	DATE	