



Personnel Requisition Action Form

EMPLOYEE INFORMATION SECTION

Employee Legal Name: _____ Effective Date: _____
 Paylocity Emp # : _____ Anniversary Date: _____
 Payroll Acct #: _____ Ordinance #: _____
 Dept Head Name: _____ Background fee (HR): \$ _____

EMPLOYEE RATE SECTION

	<u>FROM</u>	<u>TO</u>		<u>REASON</u>
Position:			New Hire:	<input type="checkbox"/>
Grade:			Rehire:	<input type="checkbox"/>
Step:			Merit Increase:	<input type="checkbox"/>
Rate of Pay:	\$	\$	Position Change:	<input type="checkbox"/>
Hourly or Annual:			Transfer:	<input type="checkbox"/>
Department:			Other (explain):	

POSITION BEING FILLED

Applicant suggested*: _____ Dept Head Name: _____
 Position: _____ Person Replaced: _____
 Department: _____

STATUS

Full-time _____ Permanent _____ Days & Hours required: _____
 Part-Time _____ Temporary _____ Replacement: state reason _____
 Seasonal _____ How Long? _____ Addition: state reason _____

QUALIFICATIONS

Please indicate clearly,
 what is absolutely required
 as a prerequisite

INITIAL APPROVAL TO FILL POSITION

Mayor's Signature: _____ Date: _____

FINAL APPROVAL

Employee: _____ Date: _____
 (part-time employee)

Department Head: _____ Date: _____
 (if applicable)

Mayor: _____ Date: _____

Human Resources: _____ Date: _____

*The Civil Rights Act of 1964 prohibits discrimination in employment practice because of race, color, religion, sex or national origin.