

NOTICE OF PERSONNEL ACTION

New Employee
 Change of Position
 Change of Salary
 Termination

Employee Name	
Conservation District	
Current Date	Effective Date of Transaction

NEW EMPLOYEE

Job Title	
Rate of Pay	\$ _____ per hour from OCC reimbursable funds \$ _____ per hour from district funds
<input type="checkbox"/> Full-time/Probationary <input type="checkbox"/> Part-time/Probationary <input type="checkbox"/> Temporary/Seasonal	

CHANGE OF POSITION

Previous Title
New Title
Explain Authorization for This Change

CHANGE OF SALARY

Old Rate of Pay	\$ _____ per hour from OCC reimbursable funds \$ _____ per hour from district funds
New Rate of Pay	\$ _____ per hour from OCC reimbursable funds \$ _____ per hour from district funds
Explain Authorization for This Change	

TERMINATION

Reason

Signature of Employee _____

Date _____

Signature of Chair _____

Date _____