



**District School Board of Pasco County
PERSONNEL ACTION FORM**

MIS # 303 Rev. 01/18

Instructional
 School Related Personnel
 Non-Instructional/Non-Bargaining
 Administrative
 Professional/Technical

Last _____ First _____ MI _____ Employee ID (or Applicant #) _____

Form Completed by (name/ext.) _____ Date _____

ACTION	
<input type="checkbox"/> NEW HIRE <input type="checkbox"/> REHIRE <input type="checkbox"/> PROMOTION <input type="checkbox"/> TRANSFER <input type="checkbox"/> FUND CHANGE <input type="checkbox"/> HRS/DAYS CHANGE	Complete Section A
<input type="checkbox"/> REAPPOINTMENT <input type="checkbox"/> OTHER (Add'l Job/Duty, Supplement, etc.) Please specify: _____	
<input type="checkbox"/> NON-REAPPOINTMENT <input type="checkbox"/> RESIGNATION <input type="checkbox"/> RETIREMENT <input type="checkbox"/> TERMINATION	Complete Section B

SECTION A		
	FROM (Leave blank for New Hire/Rehire)	TO (or NEW HIRE info)
Effective Date		
Location Name		
Location Number		
Job Class Code		
Position Control #(s)		
Title (Job Class Description)		
Work Days (196,216,245,etc)		
Hours Per Day/FTE		
Contract Type (INST only)	<input type="checkbox"/> Annual <input type="checkbox"/> TSC <input type="checkbox"/> Mini (End Date) _____	<input type="checkbox"/> Annual <input type="checkbox"/> TSC <input type="checkbox"/> Mini (End Date) _____
Replacing (if applicable)		

SECTION B	
Location _____ Last Day Worked _____ Reason for Resignation _____	
Job Class _____ Hours _____ Position Control _____ Title _____	
<i>Submit the following documents, as applicable: Resignation/Retirement form and Accrued Sick Leave Payout Designation form</i>	

SECTION C
Additional Information (include specific instructions regarding OTHER actions):

AUTHORIZATION	
To be completed by worksite administrator or designee	
Name: _____	Signature: _____

HUMAN RESOURCES USE ONLY					
Appl # _____	Req # _____	Certification _____	Email Sent _____	Allocation _____	
Effective Date _____	Entered in HRIS _____	Board Approval Date _____	Posting Date _____		
Rate of Pay _____	Pasco Years of Experience _____	Other Years of Experience _____			
Pay Grade _____	Step _____	Contract Type _____	Supplements _____		
Exit Interview _____	751 _____	752 _____	771 _____	Previous Term Date/Location _____	