

Washington Unified School District
PERSONNEL ACTION FORM

Position Title _____ Site _____
Days/yr _____ # of Hours _____ From _____ a.m. p.m. to _____ a.m. p.m. Supervised by _____
Required Qualifications _____
Advertise Yes No If yes, list publications _____

NEW POSITION (New Fund Dollars)

TYPE: Certificated Classified STATUS: Prob/Perm Temporary Categorical Summer Only
Statement of need _____
PROPOSED SALARY SCHEDULE PLACEMENT: Effective Date _____
Range/Step _____ Column _____ Annual Salary \$ _____
Budget Code _____ % FTE
Budget Code _____ % FTE
BOARD ACTION ON NEW POSITION: Date of Action _____ Item # _____

EXISTING POSITION (No New Fund Dollars)

Employee Vacating Position _____ Effective Date _____
REASON: Transfer Retirement Leave of Absence Resignation Other: _____

Employee Changing Status _____ Effective Date _____
REASON: Increase/Decrease in Assignment from _____ days/hours to _____ days/hours
 Budget Account Code Change Only Other (explain): _____

Present Budget Code _____	New Budget Code _____
_____ % FTE	_____ % FTE
_____ % FTE	_____ % FTE

BOARD ACTION

Approved Denied Date of Action: _____ Item #: _____
Effective Date if Different from Date of Board Action _____

AUTHORIZED SIGNATURES (follow steps 1-4)

1. _____ Site/Program Administrator Date	2. _____ Asst. Supt. Education Services Date
3. _____ Asst. Supt. Human Resources Date	4. _____ Asst. Supt. Business Services Date

FOR HUMAN RESOURCES USE ONLY

New Employee Name _____ Social Security No. _____ Effective Date: _____
Position Control No. _____ Date Entered: _____ By: _____ Vacancy # _____ Date Posted: _____