

HILLSBOROUGH COUNTY CIVIL SERVICE
REPORT OF APPOINTMENT OR CHANGE OF STATUS

/

NAME, LAST FIRST MIDDLE

SOCIAL SECURITY NO. BIRTH DATE

ADDRESS

MALE FEMALE SINGLE MARRIED

1. WHITE 2. BLACK 3. HISPANIC 4. ASIAN/P.I. 5. AMER. IND.

The requirements of the Civil Service Law and Rules have been satisfied

APPOINTING AUTHORITY / DESIGNATED REPRESENTATIVE

08/11/17

AGENCY DATE PREPARED

PRESENT DEPARTMENT PRESENT PAYROLL CODE

NEW DEPARTMENT NEW PAYROLL CODE

EFFECTIVE DATE

DIRECTOR, CIVIL SERVICE

	INITIAL APPOINTMENT	PRESENT STATUS	CHANGE OF STATUS	TO SUCCEED (NAME)	ACTION
Position Number					
Class Title					
Class Code					
Grade					
Hourly Rate					
Rater?		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Present Index Code:			New Index Code:		
Present O.T. Code:			New O.T. Code:		
Present Account No.:			New Account No.:		

TYPE OF APPOINTMENT	ACTION	TERMINATIONS
<input type="checkbox"/> Initial Appointment <input type="checkbox"/> Reemploy (WC/RIF/MIL) <input type="checkbox"/> Rehire (w/i 2yrs) <input type="checkbox"/> Restricted Appt. <input type="checkbox"/> Limited Duration <input type="checkbox"/> Full Time (40 hrs./wk.) <input type="checkbox"/> Reduced Hour (from 20 to 30 hrs./wk.) <input type="checkbox"/> Part Time (19 hrs./wk or less) <input type="checkbox"/> Normal Bi-Weekly Hours	<input type="checkbox"/> Acct. # Change <input type="checkbox"/> Acting <input type="checkbox"/> Address Change <input type="checkbox"/> % Annual Perf. Inc. <input type="checkbox"/> Class Regraded <input type="checkbox"/> Class Retitled <input type="checkbox"/> Demotion <input type="checkbox"/> Enroll P. I. P. <input type="checkbox"/> % Extra. Perf. Inc. <input type="checkbox"/> Index Code Change <input type="checkbox"/> Initial Prob. Complete (Adjust P. R. D.)	<input type="checkbox"/> Deceased <input type="checkbox"/> Lay Off - RIF <input type="checkbox"/> Dismissed <input type="checkbox"/> Resigned <input type="checkbox"/> Retired <input type="checkbox"/> End Temp. Time Class Code _____ List Date _____ <input type="checkbox"/> Open <input type="checkbox"/> Closed
<input type="checkbox"/> Initial Probation <input type="checkbox"/> Conditional Probation <input type="checkbox"/> Temporary <input type="checkbox"/> Emergency Temp	<input type="checkbox"/> Leave of Absence <input type="checkbox"/> Max of Pay Grade (Adjust P. R. D.) <input type="checkbox"/> Name Change <input type="checkbox"/> Payroll Code Change <input type="checkbox"/> Performance Inc. Denied (Adjust P. R. D.) <input type="checkbox"/> Position # Change <input type="checkbox"/> Position Reclassified <input type="checkbox"/> Probation Extended <input type="checkbox"/> % Probationary Perf. Inc.	<input type="checkbox"/> % Promotion <input type="checkbox"/> Remove from Acting <input type="checkbox"/> Remove P. I. P. <input type="checkbox"/> Remove Restricted <input type="checkbox"/> Return to Former Class <input type="checkbox"/> Return from Leave <input type="checkbox"/> Suspended <input type="checkbox"/> Temp Empl. Extended <input type="checkbox"/> Temp. to Perm. <input type="checkbox"/> Transfer <input type="checkbox"/> Other

AGENCY REMARKS

Benefits Date:

Performance Review Date:

Adjusted Benefits Date:

Adjusted Performance Review Date:

Probation Ends:

Released

Received

CIVIL SERVICE REMARKS