

# Personnel Action Form



Employee Name: \_\_\_\_\_

Employee #: \_\_\_\_\_

Effective Date: \_\_\_\_\_

<input type="checkbox"/> New Hire - (check one)	<input type="checkbox"/> Replacement Hire	<input type="checkbox"/> Regular	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Part Time
<input type="checkbox"/> Transfer Dept.	<input type="checkbox"/> Pay Adjustment	<input type="checkbox"/> Reinstatement - Leave	<input type="checkbox"/> Transfer Sec Grp	<input type="checkbox"/> Reports to Name _____
<input type="checkbox"/> Rehire	<input type="checkbox"/> Promotion	<input type="checkbox"/> Address Change	<input type="checkbox"/> T&A Supv Name _____	
<input type="checkbox"/> Termination ( <b>Give Reason</b> ) Reason: _____				<b>Final check delivery</b>
<input type="checkbox"/> Voluntary Resignation ( <b>Approve timecard</b> )				<input type="checkbox"/> Mail to employee
Eligible for Rehire:		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> EE will p/u from HR
				<input type="checkbox"/> Del. to offsite Ofc Mgr

## Employee Information

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Male ☐ Female

No. of Dependents: \_\_\_\_\_

☐ Single ☐ Married

## Please Mark Language Preference for Employee

☐ English ☐ Spanish

## Internal Use Only

☐ PA  
☐ DA  
☐ PP  
☐ Mileage - Merch.

## Job Information/Location

<b>Location:</b>	<input type="checkbox"/> Arizona	<input type="checkbox"/> Colorado - Peyton	<input type="checkbox"/> Florida	<input type="checkbox"/> Lake Mathews
<input type="checkbox"/> Corporate Office	<input type="checkbox"/> Salinas	<input type="checkbox"/> Texas - Austin	<input type="checkbox"/> Texas - Brenham	<input type="checkbox"/> Texas - Giddings
<input type="checkbox"/> Cactus - Buena Creek	<input type="checkbox"/> Cactus - El Paso	<input type="checkbox"/> Cactus - Puerta del Sol	<input type="checkbox"/> Cactus - Twin Oaks	<input type="checkbox"/> Propagation
<input type="checkbox"/> Cactus - Cassou	<input type="checkbox"/> Cactus - La Rueda	<input type="checkbox"/> Cactus-Quarry Merriam	<input type="checkbox"/> Cassou Color	<input type="checkbox"/> Sales
<input type="checkbox"/> Cactus - Circle R	<input type="checkbox"/> Cactus - Lilac	<input type="checkbox"/> Cactus - Reidy Canyon	<input type="checkbox"/> Fac. Maintenance	<input type="checkbox"/> Tamara Lane
<input type="checkbox"/> Cactus - Deer Springs	<input type="checkbox"/> Cactus - Monte Vista	<input type="checkbox"/> Cactus - Rincon	<input type="checkbox"/> Mechanic Shop	<input type="checkbox"/> TC Lab
<input type="checkbox"/> Cactus - Edgehill	<input type="checkbox"/> Cactus - North River	<input type="checkbox"/> Cactus - Skyline	<input type="checkbox"/> Order Fulfillment	<input type="checkbox"/> Transportation

Transfer from Dept. \_\_\_\_\_

To Dept. \_\_\_\_\_ Supervisor Name: \_\_\_\_\_

Current Job Title: \_\_\_\_\_

New Job Title: \_\_\_\_\_

## Pay Information

New Hire/Current rate of pay: \$ \_\_\_\_\_

☐ Hourly ☐ Salary

New rate of pay: \_\_\_\_\_

☐ Hourly ☐ Salary

Frequency (Check one): ☐ Each pay period

☐ Once/Month (or 14 checks)

☐ Other

Reason: ☐ Annual Increase

☐ Promotion

☐ Other - Explain: \_\_\_\_\_

Additional Pay: ☐ Auto Allowance

☐ Bonus

☐ Commission

☐ Other

☐ Commission Agreement is attached.

Amount: \$ \_\_\_\_\_ Per: \_\_\_\_\_

## Vacation/Leave Information

Type of Leave: (check one)

☐ Vacation

☐ Paid Sick Leave

☐ Unpaid Leave/LOA

☐ FMLA/PDL

☐ W/C Leave

First day: \_\_\_\_\_ Return date: \_\_\_\_\_

Total # of days/hours to be paid: \_\_\_\_\_ hours/days

## Signatures/Routing

Employee: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Manager: \_\_\_\_\_

Date: \_\_\_\_\_

President: \_\_\_\_\_

Comments: \_\_\_\_\_