

PERSONNEL ACTION FORM (PAF) Town of New Durham

EMPLOYEE NAME: _____

POSITION: _____

DEPARTMENT: _____

THE REASON FOR THE CHANGE(S):

Complete all applicable sections:

- New Hire
- Probationary Period Complete
- Merit Increase
- Promotion
- Demotion
- Transfer
- Leave of Absence: _____
- Retirement
- Resignation
- Other (Explain): _____

THE CHANGE(S):

Mark All Applicable Boxes:

- RATE
- GRADE--STEP
- POSITION
- OTHER:

Current: <small>(not applicable for new hires)</small>	New:	Office Use Only
\$	\$	

Check all that apply PART-TIME FULL-TIME SEASONAL/TEMPORARY

THE ABOVE SHALL BE EFFECTIVE: _____

RECOMMENDED BY: _____ DATE: _____

BOS AUTHORIZATION: _____ DATE: _____

EMPLOYEE SIGNATURE: _____

DATE: _____