City of Roeland Park, KS

Personnel Action Report

NAME: _____

JOB CLASSIFICATION: _____ DEPARTMENT: _____

☐ NEW HIRE:
ADDRESS: _____

CITY _____ STATE _____ ZIP _____

SOC. SEC. NO. _____ DRIVER'S LIC. NO. _____

PHONE ( ) _____ BIRTHDATE _____ / _____ / _____ SPOUSE _____

☐ PROMOTION
☐ TRANSFER
☐ RECLASSIFICATION

FROM: JOB CLASSIFICATION _____
DEPARTMENT _____

TO: JOB CLASSIFICATION _____
DEPARTMENT _____

☐ PAY CHANGE

☐ MERIT
☐ COST OF LIVING
☐ OTHER (EXPLAIN) _____

FROM: RANGE _____ RATE _____

TO: RANGE _____ RATE _____

☐ TERMINATION REASON: _____

DATE EFFECTIVE: _____

RECOMMENDED BY: _____ DATE _____ / _____ / _____
DEPARTMENT HEAD

APPROVED BY: _____ DATE _____ / _____ / _____
CITY ADMINISTRATOR

APPROVED BY: _____ DATE _____ / _____ / _____
MAYOR

OFFICE USE ONLY