

COLLIN COUNTY
PERSONNEL ACTION FORM

127 594

NAME: SPEARS DIANE DANIELLE	DATE: 3-3-89
LAST FIRST MIDDLE	DEPARTMENT: Data Processing
SOCIAL SEC. NO.: 231-82-1055	

EMPLOYMENT	Employment Date: 4-1-89	Job Title: Technical Assistant (R11/B2)	SALARY: \$1822.00
Previously Employed:	Original Employment Date:	Separation Date:	Supervisor:
ELIGIBILITY DATES: (For Office Use Only)			SALARY:

Vacation Days: 4/1/89	Sick Leave: 4/1/89	Insurance: (Medical)	Self	Dependents
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Salary and/or title change	Current Job Title	Current Salary	Range	Step
	New Job Title	New Salary	Range	Step

Reason: Satisfactory Performance Unsatisfactory Performance Exceptional Merit

TRAINING	FROM:	TO:	SICK LEAVE	Dates of Sick Leave:
LEAVE BY AGREEMENT	FROM:	TO:		Previous Days Sick Leave Taken This Year:
RETURN	DATE:	<input type="checkbox"/> Ins. Notified		Was Doctor's Statement Furnished? <input type="checkbox"/> Yes <input type="checkbox"/> No

VACATION	Date Requested - From:	To:	Total Work Days Away	Previous Days Taken This Year
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SEPARATION	Employment Date	Last Day Worked	Rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain
Vac. Pay No. Hrs.	Amt. Paid	Comp. Pay No. Hrs.	Amt. Paid

- | | | |
|---|--|---|
| <input type="checkbox"/> Voluntary Retirement | <input type="checkbox"/> Return To School | <input type="checkbox"/> Insubordination |
| <input type="checkbox"/> Mandatory Retirement, Co. Policy | <input type="checkbox"/> Family Problems | <input type="checkbox"/> Reporting Under Influence of Alcohol |
| <input type="checkbox"/> Death | <input type="checkbox"/> Resignation For Other Reasons | <input type="checkbox"/> Drinking On Duty |
| <input type="checkbox"/> Illness or Injury | <input type="checkbox"/> Reduction In Force | <input type="checkbox"/> Destruction or Removal Of Co. Property |
| <input type="checkbox"/> Leaving Area | <input type="checkbox"/> Habitually Absent or Tardy | <input type="checkbox"/> Falsification of County Records |
| <input type="checkbox"/> Accept Other Job | <input type="checkbox"/> Unreported Absence | <input type="checkbox"/> Misconduct |
| <input type="checkbox"/> Dissatisfied | <input type="checkbox"/> Leaving Work Without Permission | <input type="checkbox"/> Other (Explain in comments) |

How Many Days Advance Notice Given?

COMMENTS:

Dated this 13th day of March, 19 89

EFFECTIVE DATE: 4/1/89

Wm J Roberts
COUNTY JUDGE

DATE	EMPLOYEE (IF APPLICABLE)
3/17/89	<u>Jim Patton</u>
DATE	DEPARTMENT HEAD
	<u>Robert E. Lindberg</u>
DATE	PERSONNEL DIRECTOR