



Richland County
 Recreation
 COMMISSION
 5819 Shakespeare Road
 Columbia, SC 29223
 (803) 754-7275

POSITIONS APPLIED FOR	DO NOT WRITE IN THIS SPACE
Part-time Park manager	

The Richland County Recreation Commission does not discriminate on the basis of race, sex, national origin, age or handicap.

EMPLOYMENT APPLICATION

This is your application for employment with the Richland County Recreation Commission. Please prepare it accurately and neatly. Willful falsification of any information may result in rejection of your application or in your dismissal if you are employed by the Recreation Commission.

All qualified applications will be referred to the department where the vacancy is located. That department head is responsible for the review and evaluation of applications and recommending the most qualified applicants to be selected for an interview.

Date: 8-01-09 (TYPE OR PRINT IN INK)

1. Name Duckett Charles Torani's
 (Last) (First) (Middle)
 Address 174 Nathan Ridge Gradsden Richland S.C 29052
 (Number and Street or RFD) (City) (County) (State) (Zip Code)
 Social Security Number [REDACTED] Telephone Number (Home) (803) 353-2381

2. State the salary which you are willing to accept \$ N/A When could you begin work? 8-01-09
 Check type of employment you would accept: Part-Time Full-Time
 Hours Preferred _____
 Do you possess a valid S. C. Driver's License? yes What class? D Number [REDACTED]

3. Have you served in the U.S. Armed Forces? Yes No
 Branch of Service: Army Navy Marines Air Force Other _____
 Date Entered _____ Date Discharged or Separated _____ Type of Discharge _____
 Highest Rank Attained _____
 Reserve Status: National Guard Inactive Ready Reserve Standby Reserve Non-Member
 Are you required to attend: Summer Training? Yes No Weekly or monthly drills? Yes No
 Date Active Reserve Obligation Will End _____
 Military Branch and Name of Reserve Unit _____

4. In case of emergency notify Viola Duckett 1514 Hickory Hill Rd (803) 353-2381
 (Name) (Address) (Phone)
 Relationship to you mother
 Have you ever been employed by the Richland County Recreation Commission? Yes No
 If yes, dates _____
 Were you a member of the South Carolina Retirement System? Yes No
 If yes, Retirement Number _____

Please Print Charles Duckett
 First Name Last Name

5. Have you pled no contest or been convicted of any violation of law other than minor traffic violations? Yes No

**If yes, give details below:

Where Arrested	Date	Nature of Charge	State	Disposition/Status

****NOTE:** Report criminal offenses including felonies, misdemeanors and summary offenses. **EXAMPLES:** Driving under the influence of intoxicating beverages, drugs, fraudulent or bad checks, disturbing the peace, leaving the scene of an accident, robbery, etc. Omit minor vehicle violations and any offense committed before your 17th birthday, which was finally adjudicated in juvenile court or under a youthful offender law. Conviction of a criminal offense is not a bar to employment in all cases. The nature, severity and date of the offense in relation to the position for which you are applying are considered. Failure to accurately report offenses will be considered a serious offense by the Recreation Commission and will be grounds for disqualification from consideration and/or termination if employed.

6. EDUCATION							
School	Name and Location of School	Course of Study	Years Attended From To		Circle Last Year Completed	Did you Graduate?	Certificate or Degree Received
Elementary	Wieber School		77	85	1 2 3 4 5 6 7 8	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
High			86	90	9 10 11 12	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Business, Technical or Trade School	Middleburg Technical College	EET			1 2 3 4	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
College					1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Graduate School					1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other Studies						Yes <input type="checkbox"/> No <input type="checkbox"/>	

7. Professional Certificate or Licenses

Profession	Date of Current License or Registration	State Issuing License or State in Which Registered	Date of First License or Registration

8. List any professional honors, awards, publications, etc.

9. Give details of any special skills, training or apprenticeship _____

Indicate type of machines you have operated Calculator Dictaphone Computer Heavy Construction Equipment Light Construction Equipment

List any computer software with which you are familiar _____

Shorthand Speed _____ Typing Speed _____

10. References - Please provide names, addresses and phone number of three people, not relatives, who have known you for at least one year.

Name Joseph Nathan Address Badson S.C. Phone (803) 353-9675 Occupation Truck driver

Name Marie Gibson Address Hopkins S.C. Phone (803) 353-0988 Occupation Home Care

Name Curtis Randall Address Columbia S.C. Phone (803) 788-1684 Occupation Lawn Care

11. Have you ever been discharged or forced to resign from any job for misconduct or unsatisfactory service? Yes No
 Have you any objections to this agency making inquiry of your present employer regarding your character, qualifications, etc.? (circle one) Yes No
EXPERIENCE: Begin with your present or last job and describe in detail all periods of employment, including self employment. Include military service and part-time employment. Account for your time during any intervals or unemployment other than those when you were attending school. Use additional sheet if necessary.

Name of Employer MFP Electric
 Address of Employer 466 Smallwood dr. Chapin S.C. 29030
 Phone Number of Employer _____
 Your Job Title Electrical helper
 Specific Duties read and interpret information from blue prints, and terminate panels
 Reason for Leaving Job was downsized

From (Mo.) 2 (Yr.) 06
 To (Mo.) 3 (Yr.) 09
 Full-Time Part-Time
 Starting Salary 12⁵⁰
 Last Salary 13²⁵
 Supervisor's Name Mike Peters
 Supervisor's Title owner

Name of Employer Snipes Electric
 Address of Employer 906 S. edisto AVE Columbia SC 29205
 Phone Number of Employer (803) 252-4140
 Your Job Title Helper
 Specific Duties terminate devices, trouble shooting, and pull wires
 Reason for Leaving Better opportunity

From (Mo.) 6 (Yr.) 2001
 To (Mo.) 2 (Yr.) 2006
 Full-Time Part-Time
 Starting Salary 9⁵⁰
 Last Salary 10⁰⁰
 Supervisor's Name Harold Snipes
 Supervisor's Title owner

Name of Employer H. A Sack Co
 Address of Employer P.O. Box 528 State Hwy, GA 30459
 Phone Number of Employer _____
 Your Job Title helper
 Specific Duties To lay PVC pipe and bend conduit
 Reason for Leaving Moved back to S.C

From (Mo.) 8 (Yr.) 99
 To (Mo.) 4 (Yr.) 2001
 Full-Time Part-Time
 Starting Salary 8⁰⁰
 Last Salary 8²⁵
 Supervisor's Name Ricard
 Supervisor's Title Site supervisor

A RESUME OF YOUR EMPLOYMENT WILL NOT BE ACCEPTED IN LIEU OF THE ABOVE INFORMATION

EQUAL EMPLOYMENT OPPORTUNITY REPORTING AND PERSONNEL RESEARCH

NOTE: The information requested in this section is not used to evaluate your application. This information is needed to satisfy equal opportunity reporting and personnel research requirements.

8-01-09
 Date
Fernando
 MIDDLE

Name Duckett Charles
 LAST FIRST MIDDLE

Social Security Number _____ Sex: Male Female

Date of Birth _____ Age _____

Race (Please check one) White/Non-Hispanic African American Asian or Pacific Islander
 Native American or Alaskan Native Hispanic

Position applied for _____

APPLICANTS PLEASE COMPLETE (This tab is detached by the HRD before application is forwarded for review and evaluation.)

12.

13. List any information that you think would be pertinent or helpful. Please use additional sheets if necessary.

14. CERTIFICATE OF APPLICATION - READ CAREFULLY BEFORE SIGNING

I hereby certify that all statements made in this application are true, and I agree and understand that any willful misstatements of material facts herein will cause forfeiture on my part of all rights to any employment in this agency. The Richland County Recreation Commission (RCRC) is authorized to request a transcript where necessary to verify my education record and make whatever background investigation necessary for employment purposes. I have no objections to being fingerprinted and having my record cleared through the FBI and/or the South Carolina Law Enforcement Division (SLED). I further agree to a physical examination and/or a pre-employment drug-screening test, if such examination is required as a condition of employment by the agency.

I hereby consent to authorized representatives of RCRC contacting any of my former employers or educational institutions that I have attended and any other person or organization they determine may have information concerning my past and present work. I understand this would include my official personnel files, attendance records, background information, evaluations, educational records, military service, law enforcement records and/or any personal records deemed necessary. I also understand RCRC may make inquiries of third parties such as credit bureaus. I further release the organization, educational entity, present and former employers, law enforcement organizations and all third parties from any and all claims, of whatever nature, that I may have, as a result of any inquiry or response to such inquiries, made in connection with my application for employment. I understand that any information obtained by RCRC in the course of those contacts will be treated with the strictest confidence. However, I understand it is not possible to guarantee total confidentiality.

Applicant's Signature Charles J. [Signature] Date 8-21-09

Interviewer's Remarks

Interviewed By _____ Date _____

Charles Duckett

Grounds

- limited maintenance experience
- P.T. assistant manager, electrical work experience (Associate electrical license)
- hard working, ambitious, laid back, easy going
- likes hands-on work, likes to stay busy
- Basic maintenance equipment usage (lawn mower, weed eater, etc)
- Works well with others, no problem working alone
- Starting date: ASAP

GOOD INTERVIEW

A LOT OF ELECTRICAL EXPERIENCE / WANTS TO OWN HIS OWN ELEC. BUSINESS ONE DAY

WORKS HARD - GET THE JOB DONE ATTITUDE

BUDDY / DS OK WITH HIM DS CREW

7/22/01 ~~PS~~



9:30am Int
7-22-10

**RICHLAND COUNTY RECREATION COMMISSION
EMPLOYEE INTERNAL TRANSFER APPLICATION FORM**

Building Maintenance
Position Applied For

Hopkins Park
Location (Park, District, Etc.)

This form must be submitted in person to Human Resources. Employees are not normally eligible to transfer during their initial one-year introductory period. Employees who incur a disciplinary suspension are not eligible to transfer until six months after the date of the suspension.

Name Charles T. Duckett

Work Phone (803) 783-9374 Home Phone (803) 353-2381

Present Position P.T Assistant Manager Department _____

Date of Hire 8-16-09 Length of Service in Present Position 7 months

Specific Duties in Present Position To help patrons with various community affairs, and also maintain a clean environment

Indicate the specific training, education & experience you possess that qualifies you for the position for which you are applying (use back of form if needed); also attach resume: _____

I understand this application will be considered should a vacancy occur, but it in no way guarantees me the position. I further certify that all statements made on this application are true and I agree and understand that any miss-statements of fact may cause this application not to be considered or my employment to be terminated.

Charles T. Duckett
Signature of Employee

6-10-10
Date

For the Department with Vacancy (Return to Human Resources)

Hired: Yes No Effective Date _____

Department Director's Signature _____

HUMAN RESOURCES USE:

Date submitted by Employee: _____ Date Forwarded to Department: _____



< CLOSE

HOME RESOURCE

Employer

Regular Pay History

Show Changes for:

all

CD Docket
IFR Date: 06/15/2015

Show as of 10

Position

Interim Facility
Repairman

10/24/2016

10/24/2016

10/24/2016

10/24/2016

FLSA

NAICS Workers' Comp
Parks Maintenance

EEOC Job Classification

Officer/Owner

Corporate

Business Unit

Benefits Eligibility Class

Home Department
Full Time Property
Management

Home Cost Number

Change Reason
DBLOAD

EFFECTIVE DATE	COMPENSATION...	RATE TYPE	AMOUNT	RATE 2	PAY FREQ...	STAN..	PERCENT CHA..	AMOUNT CHA..	ANNUAL AF
(Current)									
10/01/2015	PAY IN - Pay Incr..	Salary	1,364.45	17.05..	Biweekly		39.2537	10,000.12	35,475.70
(History)									
07/01/2011	COST - Cost of L..	Salary	979.83	12.24..	Biweekly	80.00	3.0001	742.04	25,475.58
06/12/2011	PAY IN - Pay Incr..	Salary	951.29		Biweekly	80.00	10.0012	2,248.74	24,733.54
08/09/2010	PROMO - Promo..	Salary	864.80		Biweekly	80.00	35.1250	5,844.80	22,484.80
08/24/2009	NH	Hourly	8.0000		Biweekly	80.00		16,640.00	16,640.00

< 10/24/2016

Privacy Legal

TERMS OF EMPLOYMENT

Name Charles T. Duckett SSN [REDACTED]

Date of Employment or Change in Terms 8-01-09

Position Part-time Park manager Full-Time _____ Part-Time

In compliance with Section 41-10-30 of the South Carolina Code of Law, 1976, as amended, you are hereby notified of the terms of your employment:

1. **Method of Payment:** Wages \$ 8.00 per hr
_____ Salary \$ _____ per year

2. **Payday is bi-weekly. Day of payment is FRIDAY.**
Time of payment is: _____ 3:00 p.m. (Parks Division)
_____ 5:00 p.m. (All others)
Place of payment is facility where employed.

3. **Vacation:** Full-time employees receive Annual Leave at a rate of 1 ¼ days per month to be used as vacation or personal time off. Part-time employees receive no annual leave.

4. **Sick Leave Policy:** Full-time employees receive 120 hours of sick leave during the calendar year (January 1 to December 31). Sick leave may be taken for personal illness or illness/death in the immediate family. Part-time and temporary employees receive no sick leave.

Verification: The use of sick leave shall be subject to verification. When there is reason to believe that sick leave is being abused, the supervisor may, before approving the use of sick leave require the certification of a physician or other acceptable documentation describing the disability and giving the inclusive dates.

Any employee taking (3) or more consecutive days of sick leave may be required to provide a written doctor's statement. If a written doctor's statement is required, failure to do so upon request may result in termination. Sick leave may not be used for vacation and there is no sick leave severance pay.

5. **Paid Holidays:** Paid holidays for full-time employees are the same as provided by South Carolina Law for State employees. Part-time employees receive no paid holidays.

6. **Severance Pay Policy:** Full-time employees will receive any **unused** annual leave pay at the time of termination. Part-time employees receive no severance pay.

Any changes in these terms shall be made in writing and at least seven (7) days before they become effective.

Charles T. Duckett 8-01-09 John Stungis 8-01-09
Employee's Signature Date Employer's Signature Date

Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input checked="" type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other

I. Current Information: This section must be completed			
1. Employee Name: Charles Duckett		2. Job Title: PT - Assistant Park Manager	
3. Department Name: Parks	4. Job Code:	5. Job Grade:	

II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours			
6. Salary Change:	From: \$8h.00	To: \$22,485.00	Percentage Increase:
7. Class Code Change:	New Class Code: Class Code 1 Full-time (1.0 FTE)		
8. Job Code / Title Changes:	New Job Code: 160	Salary Class: Non-Exempt	
New Job Title: Building and Grounds Worker		New Job Grade: 3	
9. Department Change:	Old Dept. Name: Parks	New Department Name: Grounds Maintenance	
Reason for change(s) noted above:			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: 8/9/2009 The effective date should coincide with the start date of a payroll period.			

III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both			
12. Voluntary or involuntary? Click Here	13. Effective Date:	14. Proper Notice Given? Click Here	
		15. Would you re-employ? Click Here	
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.			
16. If voluntary resignation, why? If no rehire recommendation, why?			

IV. Leave of Absence		
17. Leave type: Click Here	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

V. Signatures & Date	
Department Head (please include dept name & telephone number)	
Division Head	<i>Jamie Lewis</i> 8/9/10
Interim Executive Director (required for pay changes exceeding normal guidelines and terminations)	<i>James Brown</i>
Human Resources Representative	

By typing my name in the appropriate area above, I certify this to be my electronic signature.

BOARD OF COMMISSIONERS:

*J. Marie Green, Chair
Rev. Charles E. Epps, Vice Chair
G. Todd Weiss, Secretary
Weston A. Furgess, Jr.
Wilbert Lewis
George D. Martin, Jr.
Barbara Mickens*



"Enriching Lives, Connecting Communities."

INTERIM EXECUTIVE DIRECTOR

James Brown, III
5819 Shakespeare Road
Columbia, SC 29223
Phone: (803) 754-7275
Fax: (803) 786-2028

Email: info@rcrc.state.sc.us
www.richlandcountyrecreation.com

August 3, 2010

Charles T. Duckett
174 Nathan Ridge Rd.
Gadsden, SC 29052

Dear Mr. Duckett:

On behalf of the Richland County Recreation Commission, I am pleased to offer you the position of Building and Grounds Worker in the Property Management Department. The starting salary for this position is \$22,485.00 annually. This position is a full-time position with full RCRC benefits.

We have made arrangements for your starting date of employment to be August 9, 2010. Please report to the RCRC 5819 Shakespeare Road Columbia, South Carolina 29223 at 10:00am for new employee orientation. Enclosed is the RCRC benefits information packet for your review prior to orientation.

Please signify your acceptance of this offer by signing and returning to me the enclosed copy of this letter. I hope you will find your employment with RCRC to be a rewarding experience. If you have any questions, you may contact our Human Resources Department at 754-7275.

Welcome to RCRC! It is our pleasure to have you as part of our team.

Sincerely,

James Brown, III
Interim Executive Director

Enclosures: Benefits Information



Nationally Accredited:
The Richland County Recreation Commission became South Carolina's first nationally accredited parks and recreation agency in 2006.

Equal Opportunity Statement: The Richland County Recreation Commission is dedicated to the concept of equal opportunity. The Commission will not discriminate on the basis of race, color, religion, sex, age, disability, national origin, or marital status, in its employment practices or in the participation policies for its facilities.

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EXECUTIVE DIRECTOR

James Brown, III
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Columbia, SC 29223
Phone: (803) 754-7275
Fax: (803) 786-2028
Email: info@rcrc.state.sc.us
www.richlandcountyrecreation.com

MEMORANDUM

To: Charles Duckett
From: James Brown, III *JB*
Executive Director
Subject: **Employment Confirmation**
Date: June 27, 2011

This is to confirm your employment with the Richland County Recreation Commission. Your annual salary for the period of July 1, 2011 – June 30, 2012 is \$24,733.28 and with the 3% Cost of Living increase is \$25,475.28.

Employee's Acknowledgment Signature: *Charles F. Duckett*

Date: 6-30-11

Please Sign and Return to Keira Session – Human Resources.

NOTHING CONTAINED IN THIS CONFIRMATION CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL EMPLOYEES ARE EMPLOYED "AT WILL" WHICH MEANS THAT THE EMPLOYEE HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT THE COMMISSION RETAINS THE SAME RIGHT. EXCEPTIONS TO THE POLICY THAT ALL EMPLOYEES ARE EMPLOYED "AT-WILL" MAY BE MADE ONLY BY WRITTEN AGREEMENT SIGNED BY THE COMMISSION AND THE EMPLOYEE.

CONFIDENTIAL



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Enriching Lives &
Connecting Communities

Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input checked="" type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

I. Current Information: This section must be completed

1. Employee Name: Charles Duckett		2. Job Title: Building and Grounds Worker	
3. Department Name: Property Management	4. Job Code: 340	5. Job Grade: 4	

II. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From:	To:	Percentage Increase:
7. Class Code Change:	New Class Code: Click Here		
8. Job Code / Title Changes:	New Job Code:	Salary Class: Click Here	
New Job Title:		New Job Grade:	
9. Department Change:	Old Dept. Name: District 4 - Buddy	New Department Name: District 1 - Antonio	
10. Reason for change(s) noted above: Job Reassignment			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: 08/25/2014 The effective date should coincide with the start date of a payroll period.			

III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both

12. Voluntary or Involuntary? Click Here	13. Effective Date:	14. Proper Notice Given? Click Here
		15. Would you re-employ? Click Here
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no retire recommendation, why?		

IV. Leave of Absence

17. Leave type: Click Here	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

V. Signatures & Date

Department Director	
Department Head	<i>Richard G. Duckett</i>
Assistant Executive Director	<i>Kenya V. Bryant</i> 8-21-14
Executive Director	<i>Geek Beaman</i> 8/21/14
Human Resources Representative	<i>Keiraly Session</i> 08/26/2014

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.
02/2013



Enriching Lives & Connecting Communities

Richland County Recreation Commission

Indicate what change is occurring (choose all that apply):

<input type="checkbox"/> Termination (Involuntary)	<input checked="" type="checkbox"/> Salary Change	<input type="checkbox"/> Leave of Absence
<input type="checkbox"/> Resignation (Voluntary)	<input checked="" type="checkbox"/> Job Title Change	<input type="checkbox"/> Scheduled Hours Change
<input type="checkbox"/> Retirement	<input type="checkbox"/> Job Reassignment	<input type="checkbox"/> Other
<input type="checkbox"/> Seasonal Employee Returning	<input type="checkbox"/> Seasonal Employee Ending	<input type="checkbox"/> Seasonal Job Transfer

I. Current Information: This section must be completed

1. Employee Name: Charles Duckett		2. Job Title: Interim Facility Repairman	
3. Department Name: Property Management	4. Job Code: 380	5. Job Grade: 5	

ii. Changes in Salary, Job Title, Grade, Department, or Scheduled Hours

6. Salary Change:	From: \$25,475.58	To: \$35,475.70	Percentage Increase:
7. Class Code Change:	New Class Code: Class Code 1 Full-time (1.0 FTE)		
8. Job Code / Title Changes:	New Job Code: 380	Salary Class: Non-Exempt	
New Job Title: Facility Repairman		New Job Grade: 5	
9. Department Change:	Old Dept. Name:	New Department Name:	
10. Reason for change(s) noted above: Salary Increase - Job Duties Increased			
11. EFFECTIVE DATE OF THE CHANGES(S) NOTED ABOVE: 11/22/2015 The effective date should coincide with the start date of a payroll period.			

III. Resignations (Voluntary Discharge) and Terminations (Involuntary Discharge)- Choose only one, not both

12. Voluntary or Involuntary? Click Here	13. Effective Date:	14. Proper Notice Given? Click Here
		15. Would you re-employ? Click Here
For any termination: You must attach or forward a disciplinary action form or detailed memo with Executive Director signature/approval describing the incident which resulted in the termination.		
16. If voluntary resignation, why? If no rehire recommendation, why?		

IV. Leave of Absence

17. Leave type: Click Here	18. Normal work schedule: (example: "Tue, Thur, Sat 9a-5p")	
19. Anticipated date leave begins:	20. Last scheduled work day:	21. Planned return date:

V. Signatures & Date

Assistant Executive Director	<i>Kerisa V. Holt</i> 12/7/15
Executive Director <small>(required for pay changes exceeding normal guidelines and terminations)</small>	<i>Greg Burdette</i> 12/8/15
Human Resources Representative	<i>Doreen Stuy</i>

When approval is e-mailed: By typing my name in the appropriate area above, I certify this to be my electronic signature.

In ADP