

CAJON VALLEY UNION SCHOOL DISTRICT
PERSONNEL CHANGE/REQUISITION

A-36 (# 8136)
(Rev 8/03)
Pers

PERSONNEL STATUS CHANGE

EMPLOYEE INITIATED CHANGES

Legal Name _____ SS# _____
School / Department _____ Job Title _____
Name Change from _____ To _____
(Signed Social Security Card is Required for Name Change)
New Address _____ Phone () _____
City _____ Zip Code _____

SITE INITIATED CHANGES

Assignment Change: From: _____ Pos # _____ Occ Code _____
(Hrs/FTE/Days/Title) To: _____ Pos # _____ Occ Code _____
Budget Change: From _____ To _____
Effective Date _____ Date Submitted _____ Initiator _____

PERSONNEL REQUISITION - TO FILL VACANCIES

School / Department _____ Title of Vacancy _____
Name of Previous Incumbent _____
Reason for Request: Transfer [] Promotion [] Resignation [] Leave of Absence [] Growth [] New Program []
Certificated: F.T.E. _____ Grade Level _____ Subject (Middle School) _____
Requirements (e.g. CLAD, BCLAD, GATE, etc.): _____
Classified: Hrs/Day _____ Hrs/Week _____ Paid Days Per Year _____
Work Hours: From _____ a.m/p.m. To _____ a.m/p.m. **Circle Work Days** M T W Th F
 Permanent Temporary Until _____ Other _____ Requested Start Date _____
Budget (including percentages) to be Charged _____
Initiator Signature _____ Date _____
Principal/Dept Head Signature _____ Date _____

PERSONNEL/PAYROLL/ACCOUNTING USE ONLY

Position Filled By _____ SS# _____
Position # _____ Occupation Code: _____ Effective Date _____ Type of Hire _____
Personnel Authorization _____ Date _____
Budget Analyst/Cost Accountant Signature _____ Date _____