

De Leon Independent School District
Personnel Action Notice

Employee Name: _____
Assignment/Position: _____
Nature of Notice: _____

SECTION 1: NEW HIRE

Employee Name: _____
Address: _____
Phone number: _____ Cell: _____
Social Security Number: _____ DL : _____
Assignment/Position: _____
Effective Date (Hire): _____
Pay Step: _____
or
Annual Pay: _____
Contract term (days): _____

SECTION 2: ADDRESS CHANGE

Address: _____
Phone number: _____ Cell: _____
Effective Date(change): _____

SECTION 3: STATUS CHANGE IN PAY OR POSITION

FROM Assignment/Position: _____
TO Assignment/Position: _____
Replacement for: _____
New pay step: _____
or
New Salary: _____
Effective Date(change): _____

SECTION 4: TERMINATION

Date of termination: _____
Eligible for rehire: _____

SECTION 5: LEAVE OF ABSENCE

Reason & Dates requested: _____

Administrator Signature

Date