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| **ADD**  **DROP** | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | **Date:** | | | | | | |
| Name | | | | | | | | | | | | | | | Phone Number | | | | | | | | | | | | | | | | | Employee ID # | | | | | | |
| Address | | | | | | | | | City | | | | | | | | | | | | | Zip Code | | | | | | | | | | Offer of Position Date | | | | | | |
| Building/Work Location | | | | | | | | | | | | | | | Immediate Supervisor | | | | | | | | | | | | | | Requested Start Date | | | | | | | | | |
| Position Title | | | | | | Grade/Subject | | | | | | | | | Union | | | MEA-NEA  Teamsters | | | | | | | | MFT/AFT  AFSCME | | | | | | | | AFSCME-Security Guards/Hall  AFSCME-Computer Lab | | | | |
|  | | | | | |  | | | | | | | | | None | | |  | | | | | | | |  | | | | | | | |  | | | | |
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| **CHANGE** | | | | | | | | | | | |  | | | |  | |  | | | | | | | | | | | | | | | | | | | | |
| **FROM:** | | | | | | | | | | | |  | | | |  | | **TO:** | | | | | | | | | | | | | | | | | | | | |
|  | | Assignment: | |  | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | | | | |  | |
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|  | | Base Salary: | | From: | | | |  | | | To: |  | | | | | | | Date Effective/Retro to: | | | | | | | | |  | | | | | | | | |  | |
|  | | Stipend: | | From: | | | |  | | | To: |  | | | | | | | Date Effective/Retro to: | | | | | | | | |  | | | | | | | | |  | |
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| **LEAVE OF ABSENCE** | | | | | | | | | | | | |  |  | | | | | | | |  | |  | | | | | | | | |  | |  | | | |
| Reason  FMLA  Medical  Workers Comp  Layoff | | | | | | | | | | | | | | | | | | | | | | | | | | | Date Leave Begins | | | | | | | | | | | |
| Approximate Length of Leave | | | | | | | Actual Length of Leave | | | | | Approximate Return Date | | | | | | | | | | | | | Actual Return Date | | | | | | | | | | | Sick Bank Use (if applicable) | | |
| Date to Remove from Insurance | | | | | | | Board Action Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REMOVE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | Resignation | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |
|  |  | | | | Retirement | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |
|  |  | | | | Termination | | | | |  | | | | | | | | | | |  | |  | | | | | | |  |  | | | | | | |  |
|  | Date | | | |  | | | | | Last Work Day | | | | | | | | | | |  | | Last Pay Date | | | | | | |  | Date to Remove from Insurance | | | | | | |  |
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| REMARKSLogin/Id’s to Create/Remove Curriculum Business Manager  \_\_\_\_\_ Kalpa \_\_\_\_\_ E-mail  \_\_\_\_\_ Curriculum Crafter \_\_\_\_\_ Microsoft  \_\_\_\_\_ Blackboard Superintendent  Benefits Coordinator \_\_\_\_\_\_ PowerSchools  \_\_\_\_\_ Aesop \_\_\_\_\_\_ DataDirector  \_\_\_\_\_ Safeschools Human Resources  \_\_\_\_\_\_ Stages    \_\_\_\_\_ Powerschools\_\_\_\_\_ Stages (Davis | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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