



# Job Action Form Non-Bargaining Unit

COST ALLOCATION					
Fund	Dept	Division	Cost Center	Object #	%

Date: \_\_\_\_\_

Submitted By: \_\_\_\_\_

Supervisor Name/Phone: \_\_\_\_\_

Work Site Location: \_\_\_\_\_

Job Title: \_\_\_\_\_

Hourly Pay Rate: \_\_\_\_\_ Hours/Week: \_\_\_\_\_

Department: \_\_\_\_\_

Division: \_\_\_\_\_

Division Unit: \_\_\_\_\_

Desired Start: \_\_\_\_\_ Projected End Date: \_\_\_\_\_

**Position Status:**

- Temporary (67 Day)
- Temporary (100 Day Student)
- Part-Time (13 or 13.5 hours/week)
- Seasonal (Non-Union)

**Action:**

- New Hire
- Rehire

**Vacancy Reason:**

- New Position
- Separation from Employment

*If position is not new, list name of former incumbent below:*

\_\_\_\_\_

<b>For Human Resources Use Only</b>	PERA Eligible: <input type="checkbox"/> Yes <input type="checkbox"/> No
Name: _____	NW #: _____ Social Security #: _____
Address: _____	City, State, Zip: _____
Home Phone: _____	Cell Phone: _____ Birth Date: _____
Marital Status: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W	Gender: <input type="checkbox"/> M <input type="checkbox"/> F Citizen: <input type="checkbox"/> Y <input type="checkbox"/> N Race: _____
Job #: _____	Tax Status: _____ Effective Date: _____

**Approval**

Human Resources Review

\_\_\_\_\_  
Budget Manager

\_\_\_\_\_  
Division Manager

\_\_\_\_\_  
Chief Administrative Officer

\_\_\_\_\_  
Department Director

\_\_\_\_\_  
Human Resources Manager

<b>For Budget/HR Use Only</b>	<input type="checkbox"/> Manager <input type="checkbox"/> Elected Official <input type="checkbox"/> Appointed	Job Class: _____	WC Code: _____	Approved FTE: _____
Description: _____		Department: _____		
Benefit Group: _____		Pay Group: _____		
EEOC Category: _____		EEOC Function: _____		

Distribution: Payroll \_\_\_\_\_ NW \_\_\_\_\_ Access \_\_\_\_\_ New Hire \_\_\_\_\_ JAF # \_\_\_\_\_

## Position Justification

1. Is the position budgeted for the current year?  Yes  No
2. Are you within your salary budgets for the current year?  Yes  No
3. What options have you explored to complete the work without this position?
  
4. How does filling this position complement your staffing vision?
  
5. What is your timing for hiring this position; can it be delayed until later in the year if necessary?

### NON-BARGAINING UNIT TEMPORARY & PART-TIME STATUS DETERMINATION

*Tasks and Duties Performed:*

#### COMPLETE FOR FULL-TIME TEMPORARY STATUS

1. How many days in this calendar year will the essential tasks of this position need to be performed by someone? \_\_\_\_\_ days/year
2. Does any other temporary position perform the same or substantially equivalent work?  No  Yes; *if yes*, how many? \_\_\_\_\_  
*If yes*, does any one or more of those temporary positions have a different beginning and ending date of the term of employment than this position?  
 Yes  No
3. Explain the scheduling of the positions over the term of all the positions:
  
4. Describe the operational need for separate temporary positions doing same or substantially equivalent work at different periods of time:

#### COMPLETE FOR PART-TIME STATUS

**Scheduled Work:** \_\_\_\_\_ days/week \_\_\_\_\_ hours/week (Limit for work unit: 40 hours/week = 13.5 hours; 37.5 hours/week = 13 hours)

Regardless of hours scheduled for a person:

1. How many hours of this type of work are needed to be performed each day? \_\_\_\_\_ hours/day; each year? \_\_\_\_\_ hours/year
2. How many days in this calendar year will the essential tasks of this position need to be performed by someone? \_\_\_\_\_ days/year
3. Does any other part-time position perform the same or substantially equivalent work?  No  Yes; *if yes*, how many? \_\_\_\_\_  
*If yes*, does any one or more of those part-time positions have a different beginning and ending time or date of the daily scheduled hours, or term of employment, than this position?  Yes  No
4. Explain the scheduling of the part-time positions over the hours of the day and term of all the positions:
  
5. Describe the operational need for separate part-time positions doing same or substantially equivalent work at different periods of time:

Determination of Compliance  
by Attorney's Office:

- Approved  
 Rejected

Reviewed by: \_\_\_\_\_