

# REQUEST FOR PERSONNEL ACTION

**ACTION REQUESTED FOR POSITION** (Please check the box to the left of the action you are requesting):

<input type="checkbox"/> <b>New Position</b>	<input type="checkbox"/> <b>Modify (Change) Position</b>	<input type="checkbox"/> <b>Delimit Assignment (Person)</b>
<input type="checkbox"/> <b>Continue Current Position</b>	<input type="checkbox"/> <b>Defund (Close) Position</b>	

**POSITION/TITLE** (Please check the box to the left of the title/position):

<input type="checkbox"/> <b>Teacher Assistant</b>	<input type="checkbox"/> <b>Professional Expert ----</b>	<input type="checkbox"/> <b>Coach / Teacher Advisor ----</b>
<input type="checkbox"/> <b>Education Aide</b>	<input type="checkbox"/> <b>Student Aide ----</b>	<input type="checkbox"/> <b>Support Services</b> (Specify Class Title Below)
<input type="checkbox"/> <b>Classified Relief</b>	<input type="checkbox"/> <b>Community Rep. ----</b>	<b>Job Title</b>
<input type="checkbox"/> <b>Temporary Certificated Assignment ----</b>		<input type="checkbox"/> <b>Other</b>

**EMPLOYEE / ASSIGNMENT / FUNDING INFORMATION:** (Use "tab" to move to the next field)

<b>Name</b>				<b>Person ID</b>	
	(Last)	(First)	(M.I.)		
<b>Beginning Date</b>		<b>Ending Date</b>	<b>Job Code</b>		<b>Rate</b>
<b>Differential</b>		<b>Personnel Sub Area</b>		<b>Hours per day</b>	<b>Total annual fiscal hours *</b>
<b>Calendar Option</b>		<b>Emp Sub Group</b>			
<b>From Org Unit Name</b>		<b>To Org Unit Name</b>			
<b>Comments</b>					

\*Mandatory for Part-time employees.

**BUDGET AND PAYROLL / TIME REPORTING:** (Use "tab" to move to the next field)

<b>SACS Fund</b>		<b>Functional Area</b>		<b>EE Group</b>	
<b>LAUSD Program Name</b>		<b>Position ID Number</b>			
<b>IN PLACE OF:</b>	<b>Name</b>			<b>PERNR</b>	

I certify that the assignment of this employee is in accord with Board Rule 1911 (Nepotism) and avoids the assignment of close relatives of cohabitants to work in situations where conflicts of interest could arise.

**REQUESTED BY:**

<b>Org Unit Name</b>											
<b>ESC or Office</b>		<b>Fund Center / Org Unit Code</b>									
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">Principal / Administrator / Supervisor Signature</td> <td style="width: 33%; border-bottom: 1px solid black;">Print Name</td> <td style="width: 33%; border-bottom: 1px solid black;">Telephone No.</td> </tr> <tr> <td style="width: 33%; border-bottom: 1px solid black;">Email</td> <td style="width: 33%; border-bottom: 1px solid black;">Date</td> <td style="width: 33%; border-bottom: 1px solid black;">Contact person Telephone No.</td> </tr> </table>						Principal / Administrator / Supervisor Signature	Print Name	Telephone No.	Email	Date	Contact person Telephone No.
Principal / Administrator / Supervisor Signature	Print Name	Telephone No.									
Email	Date	Contact person Telephone No.									

If required, appropriate processing packets must be attached to this request. Teacher Assistant packets are available from the Instructional Assistance Office and may be requested by calling (213) 241-6300.

**Schools: Please return completed form to the ESC Business and Finance Office.**

FOR ESC BUSINESS AND FINANCE OFFICE USE ONLY							
<b>Authorizations:</b>		<b>Date processed:</b>					
FOR HUMAN RESOURCES USE ONLY							
<b>Assign. Tech.</b>		<b>Date:</b>		<b>Auditor:</b>		<b>Date:</b>	

