

BOSTON PUBLIC SCHOOLS PERSONNEL ACTION REQUEST FORM

Name:	Employee ID (six digits):	Dept./School: RC Number:
ACTION	REASON	REQUIRED INFORMATION
POSITION CHANGE <small>(rc mgr, headmaster, principal signature)</small>	<input type="checkbox"/> Position Change within Department/School <input type="checkbox"/> Designation/Teacher in Charge <input type="checkbox"/> Job Reclassification	Proposed Effective Date: Title: To Position Number:
LEAVE OF ABSENCE/ RETURN FROM LEAVE <small>(rc mgr/ headmaster/principal)</small>	<input type="checkbox"/> Following Adoption <input type="checkbox"/> Family & Medical Leave Act <input type="checkbox"/> Maternity/Paternity <small>(application required)</small> <input type="checkbox"/> Education/Study <input type="checkbox"/> Military Service <input type="checkbox"/> Personal Reasons <input type="checkbox"/> Personal Illness <input type="checkbox"/> Return from Leave	Effective Date: Return Date: Position Number: Title:
TERMINATION/ RETIREMENT	<input type="checkbox"/> AWOL <input type="checkbox"/> Discharge for Cause <input type="checkbox"/> Dismissal <input type="checkbox"/> Non-R/A <input type="checkbox"/> Layoff <input type="checkbox"/> Retirement <input type="checkbox"/> Death <input type="checkbox"/> Failed Probationary Period <input type="checkbox"/> Resignation <small>(letter from employee required)</small>	Effective Date:
PAY ADJUSTMENT <small>(employee signature required)</small>	<input type="checkbox"/> Adjusted Payroll Date <small>(Civil Service – original documentation required)</small> <input type="checkbox"/> Salary Step <small>(Specify)</small> <input type="checkbox"/> Outside Service <small>(original documentation required)</small> <input type="checkbox"/> Career Award <small>(Specify)</small> <input type="checkbox"/> Salary Lane <small>(Specify) (original transcripts required)</small> <input type="checkbox"/> Tuition Reimbursement <small>(original transcripts, documentation of payment and signed affidavit required)</small>	For HR Use Only Effective Date: Old Salary: New Salary:
PERSONAL DATA CHANGE <small>(employee signature required)</small>	<input type="checkbox"/> Name Change <input type="checkbox"/> Telephone Change <input type="checkbox"/> Home Address Change <small>(W-4 and M-4 required)</small> <input type="checkbox"/> Mailing Address Change <input type="checkbox"/> Change in Federal/State Withholdings <small>(W-4 and M-4 required)</small>	New Name: New Address: New Phone:
Originator's Signature:		Date:
For HR Use Only: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	HR Signature:	Date:

PLEASE NOTE: All hiring of staff new to the department/school should be completed through the BPS Recruiting Center in Kenexa. The PS03 form will no longer be used for hiring. Please contact the Office of Human Resources with any questions.

Additional Explanation (if necessary):