



Gallon City Health Department
Personnel Action Form

Carol Jones
Employee's Name

03/26/2025
Date

1. New Home Address New Phone Number

2. New Classification Effective Date Range Step

3. Marital Change Status: [] M [] D [] W Effective Date:

4. Leave of Absence: Type Dates

5. Resignation: Reason Effective Date

6. Merit Increase: Classification Anniversary Date
Range Step \$ From \$ To

7. Termination: Reason Effective Date

8. Suspension: Reason Effective Date

9. Change in person to notify in case of emergency: Name

Address Phone Number

10. Appointment: \$15.50/hour 03/31/2025
Salary Rate Date Commencing

Andrea Barnes
Department Head Approval

Shelle By
Board of Health Approval

3/26/2025
Date

3/27/25
Date

Additional Comments (please use other side if more space is needed):
Carol Jones hired as part time clerical MA at \$15.50 per hour starting on March 31, 2025.