NORTHAMPTON PUBLIC SCHOOLS

HRD-2 Form

| Employee Name: | School: |
|---|---|
| Employee No. | |
| To be consulated by Administration | |
| To be completed by Administrator: | |
| Proposed Date Of Change Po | osition: |
| Action: Appt/New Hire Appt/Add'l Posit Promotion Name/Address C Shift Change Transfer/Loc Cha | Change ange |
| | ermination Retirement |
| Leave of Absence: Suspension: with pay? Yes No Attach copy of suspension letter FMLA: Are FMLA forms attached? Yes No Explain: | |
| For Appointments: Permanent (lasting >6 months) Intermittent Hours | ☐ Temporary (lasting <6 months) ☐ Regular Hours: per week |
| Please check if any of these apply: Teacher-Spec Ed Stipend ESP Spec Ed \$.25/Reason # Custodians-Night Shift Differential | |
| Notes/Additional Information: | |
| Approved By: | Date: |
| To be completed by Business Office: | |
| New Info: Org: | Obj: |
| Approved By: | Date: |
| To be completed by Superintendent: | |
| | ount: |
| Approved By: | Date: |
| For HR Use: | |
| Approved Start Date: Start Effective Date Approved By: CC: Originator Superintendent's Office: | Date: Employee: (In lieu of Approval Letter) |

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