
Instructions for the Request for Personnel Action Form

PLEASE NOTE: This Form Must Be Typed

Section 1: Form Type

- Select whether the form being submitted is a new version or an amended version.
 - New Form – This is the first form completed for this particular personnel action. This means that no other form, neither recently or previously, have been submitted for this personnel action.
 - Amended Form – This is a revised copy of a previous form completed for this particular personnel action. This is ***NOT*** the first form completed for this personnel action.

Section 2: Department

- From the list, choose the department where the employee is working.

Section 3: Dates

- Date Submitted – Type or select from the calendar the date which the form is being completed.
- Effective Date of Action – Type or select from the calendar the effective date of the personnel action.

Section 4: Employee's Address Information

- Type the employee's name: last name, first name, and middle name/initial
 - Type the employee's mailing address (and physical address – if different from mailing).
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Section 5: Employee's Personal Information

NOTE: This info must appear on the Request for Personnel Action Form exactly as it appears on the employees' Social Security card.

- Select employee's gender – whether male or female
 - From the drop-down list, choose employee's race/ethnicity
 - From the drop-down list, choose employee's marital status
 - Type the employee's Social Security Number (no dashes necessary – just the 9 digits)
 - Type or select from the calendar the employee's birthdate
 - Type the employee's contact telephone number (no dashes necessary – just the 10 digits, which include the area code).
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Section 6: Reason for Action

NOTE: Remember that a Request for Personnel Action form (HC-100) must submitted for all employee position, status, and payroll changes

- From the drop down list, select the personnel action which is being requested (new hire, termination, etc.)
 - If FMLA is selected as the reason for the personnel action, the starting and ending dates must also be entered or selected from the calendar.
 - Select Transfer Between Departments and choose from the list of departments if an employee has moved from one Halifax County agency to another.
 - **Example:** An employee ends employment with Emergency Services and begins employment with Sheriff's Department. Both the previous and new department should select this option – not 'resign' or 'new hire'. Since salary & status information is unknown to either department, each department should complete only its position information. This will help the new department, Human Resources, and Finance to transfer any accumulated leave and service time.
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Section 7: Leave Without Pay

- When Leave Without Pay is selected as the personnel action, the starting and ending dates for which the employee is (or will be) on LWOP must be entered or selected from the calendar.
 - Shared Leave – When Shared Leave is selected as the personnel action, the requested hours of shared leave must be entered in the appropriate box, and the starting and ending dates must also be entered or selected from the calendar.
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Section 8: Type of Appointment

- When an employee is new to a position (whether by new hire, promotion, transfer, etc.) from the drop-down list, choose whether the new position is regular, temporary, or part-time.
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Section 9: Law Enforcement & Emergency Medical Services

NOTE: This section is for LEO & EMS personnel only.

- Select the appropriate box to indicate whether the employee is a “Sworn Officer” and if the employee is on a 28-Day Pay Cycle”.
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Section 10: Employee Status

- All departments have a probationary period. From the drop-down list, choose whether the probationary period is 6, 9, or 12 months. Also, type or select from the calendar the starting and ending date of the departmental probationary period.
- Career Status Probationary Period **(DSS and Public Health Only)** – The Office of State Personnel (OSP) requires all positions that are regulated under the State Personnel Act (SPA) to enforce this 24 month probationary period.

If this option is selected, also enter the starting and ending date of this probationary period.

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Section 10: Employee Status, continued

- Trainee/Work-Against – For some positions, when an employee is hired and they do not meet the full classification, they may be eligible to complete a work-against progression.
 - In the box provided, select from the calendar or enter the date in which the employee will be fully qualified for the position.
 - Work-Against Progression – Type the order in which the employee’s work-against progression should be executed.
 - **Example:** SW I = 1 yr.; SW II = 1 yr., then SW III
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Section 11: Position Classification

- When a position is newly occupied by an employee, list the previous employee that held the position.
 - If the position is new and no other employee occupied the position, type “New” in the space provided.
 - Current/Last Classification – Type the **official** title of the employee’s current position, or last position if the employee’s position is changing.
 - Requested/New Classification – Type the **official** title of the new position which the employee will be occupying.
 - Position Number /Grade/Step/Annual Salary/Monthly or Hourly Salary – Type the county position number, grade, step, and salary information in the appropriate Current/Last and Requested/New position classifications.
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Section 12: Separation

- Upon an employee exiting employment with the County, enter the remaining annual leave and sick leave.

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Section 12: Separation, continued

- Select the appropriate box to choose if the employee requested to transfer his/her remaining sick leave to another approved NC governmental agency.
 - Select the appropriate box to choose if the employee requested to transfer his/her remaining sick leave to the county's shared leave bank.
 - If the employee chose to transfer sick leave, enter the amount of hours to transfer in the box provided.
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Section 13: Notes & Clarification

- Type any additional notes that may assist in better clarifying or explaining the personnel action.
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Section 14: Signatures

- Submit the form to the department head or appropriate designee for signature and date.
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For Personnel Requests, this form must be submitted and approved prior to any employment offer. For candidates being placed at a salary above step 3, a Hiring Salary Justification Form (HR1145) will need to accompany this form and be submitted to Human Resources for approval prior to job offer. At completion of recruitment, attach the following: Interview Summary, Interviewee Applications and HR1145 (if applicable). On terminations, this form must be submitted no later than one week prior to employee's last day and employee must schedule an appointment with HR to finalize any exit paperwork.

Important Note: If the HC-100 is being prepared close to the due date, after obtaining the required department head signature, bring the form directly to Human Resources so that it may be approved and further directed, if necessary.