

LAWRENCE COUNTY
PERSONNEL REQUEST FORM

EMPLOYEE NAME: **Joshua Morford**

EMPLOYEE CONTACT NUMBER: **605-891-8810**

CHECK ONE: New Hire Step Raise Classification Change

RESIDENT OF LAWRENCE COUNTY: YES NO

NEPOTISM WITHIN OFFICE: YES NO

EMPLOYEE MANUAL WAIVER NEEDED: YES NO

DEPARTMENT: **Sheriff's Office**

POSITION: **Corrections 2**

GRADE 1 2 3

BASE PAY \$ **20.86**

EMPLOYEE CLASSIFICATION:

- Full-Time (40)
- Three-Quarter Time (30-39)
- Half-Time (20-29)
- Part-Time (under 20)

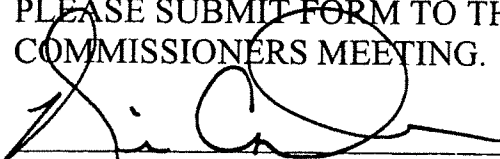
And

- Permanent
- Seasonal
- Temporary
- Reserve
- Fill-In

EMPLOYEE EFFECTIVE DATE OF HIRE / CHANGE: **11/07/2021**

TRAINING HOURS: YES NO How Many? _____ Rate: \$ _____

PLEASE SUBMIT FORM TO THE AUDITOR'S OFFICE PRIOR TO COMMISSIONERS MEETING.



Department Head Signature

11/03/21

Date