

LAWRENCE COUNTY  
PERSONNEL REQUEST FORM

EMPLOYEE NAME: Shelley Dragoo

EMPLOYEE CONTACT NUMBER: 605-920-2237

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: \_\_\_\_\_

POSITION: Cell Phone per diem \$50.00 per month

GRADE  1  2  3

BASE PAY \$ \_\_\_\_\_

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: 01/02/2022

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

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

  
\_\_\_\_\_  
Department Head Signature

12/30/20  
\_\_\_\_\_  
Date