

LAWRENCE COUNTY
PERSONNEL REQUEST FORM

EMPLOYEE NAME: Keri McPheeters

EMPLOYEE CONTACT NUMBER: 605-591-9028

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 1

GRADE 1 2 3

BASE PAY \$ 20.63

EMPLOYEE CLASSIFICATION:

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

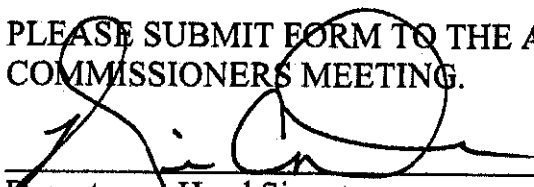
And

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

EMPLOYEE EFFECTIVE DATE OF HIRE / CHANGE: 02/06/2022

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

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


Department Head Signature

02/02/22
Date

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 \$ 22.34

EMPLOYEE CLASSIFICATION:

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

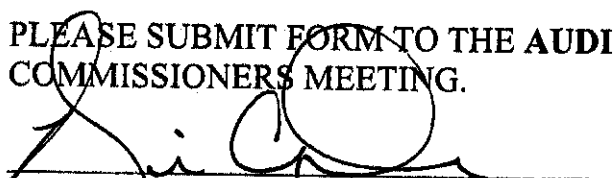
And

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

EMPLOYEE EFFECTIVE DATE OF HIRE / CHANGE: 02/06/2022

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

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


Department Head Signature

02/02/22
Date

LAWRENCE COUNTY
PERSONNEL REQUEST FORM

EMPLOYEE NAME: Sue Kellogg

EMPLOYEE CONTACT NUMBER: 605-641-2060

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: Criminal Analyst

GRADE 1 2 3

BASE PAY \$ 22-70

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: 02/20/2022

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

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



Department Head Signature

02/02/22

Date