

LAWRENCE COUNTY
PERSONNEL REQUEST FORM

EMPLOYEE NAME: Michael Harris

EMPLOYEE CONTACT NUMBER: 605-210-1790

DATE OF HIRE: 08/07/2023

CHECK ONE: New Hire Step Raise Classification Change

RESIDENT OF LAWRENCE COUNTY: YES NO
If no, indicate City/County of residence:

NEPOTISM WITHIN OFFICE: YES NO

EMPLOYEE MANUAL WAIVER NEEDED: YES NO

DEPARTMENT: Sheriff's Office

POSITION: Corrections 1

GRADE 1 2 3

BASE PAY \$ 22.09

EMPLOYEE CLASSIFICATION:

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

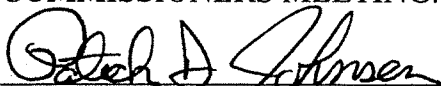
And

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

EMPLOYEE EFFECTIVE DATE OF HIRE / CHANGE: 10/06/2023

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

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



Department Head Signature

10-6-23

Date