

EMPLOYEE NAME: _____
 Address: _____
 Email Address: Personal _____ Work _____
 Phone: Home: _____ Work: _____ Cell: _____

DEPT.: Admin P&M Rec.
 Primary
 Location: _____
 Orig. Hire Date: _____
 Rehire Date: _____
 Supv. Name: _____

PAY SCHEDULE APPROVED BY THE BOARD OF DIRECTORS ON 12/5/19; EFFECTIVE ON 12/27/19

(CHECK ONE)

(MARK HOURLY PAY RATE)

P/T POSITIONS BY CLASSIFICATION

PAY RANGES BY CLASSIFICATION

<u>CLASSIFICATION 1:</u>		<u>STEP 1</u>	<u>STEP 2</u>	<u>STEP 3</u>	<u>STEP 4</u>
<input type="checkbox"/> Recreation Aide	<input type="checkbox"/> Scorekeeper	\$13.00			
<input type="checkbox"/> Cashier	<input type="checkbox"/> Golf Assistant				
<u>CLASSIFICATION 2:</u>		\$13.00	\$13.24	\$13.48	13.73
<input type="checkbox"/> Program Assistant	<input type="checkbox"/> Rec Attendant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Golf Assistant II	<input type="checkbox"/> Recreation Counselor				
<input type="checkbox"/> Youth Sports Referee	<input type="checkbox"/> Maintenance Worker I				
<u>CLASSIFICATION 3:</u>		\$13.73	\$13.85	\$14.13	\$14.41
<input type="checkbox"/> Administrative Assistant III	<input type="checkbox"/> Recreation Specialist I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Preschool Instructor Sub.	<input type="checkbox"/> Golf Specialist				
<input type="checkbox"/> Lifeguard	<input type="checkbox"/> Maintenance Worker II				
<u>CLASSIFICATION 4:</u>		\$14.54	\$14.90	\$15.27	\$15.67
<input type="checkbox"/> Administrative Assistant IV	<input type="checkbox"/> Recreation Specialist II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Golf Professional	<input type="checkbox"/> Senior Lifeguard (WSI)				
<input type="checkbox"/> Maintenance Worker III	<input type="checkbox"/> Site Coordinator				
<input type="checkbox"/> Assistant Director					
<u>CLASSIFICATION 5:</u>		\$16.45	\$16.86	\$17.28	\$17.67
<input type="checkbox"/> Administrative Assistant V	<input type="checkbox"/> Mechanic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Assistant Pool Manager	<input type="checkbox"/> Museum Director				
<input type="checkbox"/> Computer Technician	<input type="checkbox"/> Transit Van Driver				
<input type="checkbox"/> Maintenance Worker IV					
<u>CLASSIFICATION 6:</u>		\$17.67	\$18.55	\$19.47	\$20.45
<input type="checkbox"/> Pool Manager	<input type="checkbox"/> Site Director	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Administrative Assistant VI					
<u>CLASSIFICATION 7:</u>		\$20.97	\$21.48	\$22.03	\$22.58
<input type="checkbox"/> Recreation Coordinator P/T		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CLASSIFICATION 8:</u>		\$26.93	\$27.59	\$28.28	\$29.00
<input type="checkbox"/> Park Ranger I		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>CLASSIFICATION 9:</u>		\$29.72	\$30.47	\$31.23	\$32.00
<input type="checkbox"/> Park Ranger II		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(CHECK ONE OR MORE)

ACTION:

- New Hire
- Rehire
- Change Rate
- Merit Increase
- Minimum Wage Increase
- Reclassification
- Promotion
- Additional Classification
- Pay Schedule Adjustment
- Inactive
- Reactivate
- Other

Terminate:

- Resigned
- Discharged
- Work Completed
- Ineligible for Rehire
- Other – Please explain below:

EFFECTIVE ACTION DATE:

- _____
- When Processed

OTHER:

- DMV Processed

COMMENTS:

CLEARANCE:

- Cell Phone Tool(s)
- Key(s) Uniform
- Cal Card Walkie Talkie
- Other

List:

SPECIAL INSTRUCTOR / SPORTS OFFICIALS

Specialist Instructor: Class Topic _____ Rate _____ (% of base rate)
 Sports Official: Sport _____ Rate(s) \$ _____ per game

EMPLOYEE: *Your employment is "at will", which cannot be changed without the written consent of the R.S.R.P.D. District manager.*

APPROVAL: Job Cost No.: _____

 Supv. or Coord. Initials / Date Dept. Head Initials / Date

PAYROLL:

 Initials / Date

H.R.:

 Initials / Date

 Employee's Signature

 Date Signed