

SAMPLE

THE NAVAJO NATION
PERSONNEL ACTION FORM

Employee Position I.D. No.

DPM USE ONLY

Form containing fields for Employment Notice, Change Notice, Termination Notice, Effective Date (October 1, 2021), Employee Name (Doe, John Yazzie), Mailing Address, Social Security Number (000-00-0000), Census Number, Marital Status, Gender, Date of Birth, Ethnic Code, Worksite, Division/Department (DHR / Department of Personnel Management), Department Number (022), Business Unit Number (000000.0000), Position Title (Administrative Assistant), Class Code (1260), Grade Step, Hourly Rate, Per Annum, Remarks (Extension of Temporary Employment, Not to Exceed: mm/dd/yyyy), Employee Signature (UNAVAILABLE FOR SIGNATURE), Date, Type of Termination (Resignation, Discharge, Layoff), Department Acceptance (REQUIRED), Department Release, Department of Personnel Management, and various departmental clearance checkboxes.

Type of Action: Extension of Temporary Employment

Notice Type: Change

Pursuant to the Navajo Nation Personnel Policies Manual ("NNPPM"), V.A.5. Temporary
a. Temporary employees are those who are hired as interim replacements or to supplement the work force, or to assist in the completion of a specific project.
b. Employment of a temporary to fill a vacant regular status position is limited to a maximum of six consecutive months in a program's fiscal year.
c. Employment of a temporary in a 2320 account is limited to a maximum of six consecutive months in a program's fiscal year, however, a temporary employee may be extended for a maximum of an additional six consecutive months where, the program justifies maintaining the position as temporary or budget the position as regular status.

ATTACHMENTS & SUPPORTING DOCUMENTS

- Checkboxes for attachment requirements: If the extension of temporary employment is less than (6) months, the following is required: Justification Memorandum - Copy (Reason(s) for the extension, Duties & responsibilities during the extension, Start and End Dates of the extension). If the extension exceeds (6) consecutive months, the following is also required: Additional justification in accordance to the NNPPM V.A.5.c., Approval from the HR Director of the Department of Personnel Management ("DPM").

PAF REQUIREMENTS

- Checkboxes for PAF requirements: Employee's Signature is preferred but not required. If the employee is unavailable, the PAF must state "Unavailable for Signature"; Department Acceptance Signature & Date; Not to Exceed Date.

OTHER REQUIREMENTS

- Checkbox for other requirements: If the position is externally funded by a contract/grant, prior verification from Contract Accounting/OOC is required.