**SAMPLE** 

## THE NAVAJO NATION PERSONNEL ACTION FORM

Employee Position I.D. No.

DPM USE ONLY

Employment Notice	Change Notice	Termination Notice	October 1, 2021
Employee Name (Last, First Middle)	Mailing Address	(City, State, Zip Code)	Social Security Number
Yazzie, John Doe			000-00-0000
Census Number Marital Status	Sex	Date of Birth Ethnic Code	Worksite
Division /Department		Department Number	Business Unit Number
DHR/Department of Personne	Management	[600]	000000.0000
Position Title		Class Code Grade Step	Hourly Rate Per Annum
Office Specialist		1366	
Remarks: End of Administrative Leave with Pay			
Employee Signature	Date	Type of Termination:	on 🗌 Discharge 🔲 Layoff
UNAVAILABLE FOR SIGNATURE  This section must be completed to ensure that all Tribal monies/property during employment			
Department Acceptance Date have been accounted for by the respective NN Departments/Offices			
REQUIRE	Cas		EE Benefits
Department Release			EE HousingFleet Mgmt
		ravel Adv	Veterans
Department of Personnel Management	Date C	redit Svcs	Property
	Clea	arance by initial from each section/department	Retirement
Type of Action: End of Administrative Leave Notice Type: Change			
Pursuant to the Navajo Nation Personnel Policies Manual ("NNPPM"), X.B.3.c.1, Administrative Leave - Investigations,			
b. If the investigation is completed before the expiration of the administrative leave, the supervisor shall end the administrative			
leave and inform the employee he or she will return to work. If the administrative leave expires before the investigation is			
completed, the employee will return to work. The expiration of administrative leave does not prevent a supervisor from			
continuing the investigation and taking disciplinary action under Subsection c. after the employee returns to work.			
c. After the investigation is completed, if a supervisor believes disciplinary action is necessary, he or she shall discipline the			
employee under Section XIII. and XV. of this Manual.			
As best practice, programs should submit the End of Administrative Leave PAF at the same time as the Start of Administrative			
Leave PAF to avoid any delays in processing, granted that an extension is not requested.			
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			
☐ Effective date shall the last day of the administrative leave period			
OTHER REQUIREMENTS			
☐ If the position is funded by an external contract and/or grant, prior verification from the Contract Accounting Section with the Office of the Controller is required.			