Georgia Public Library Service
Personnel Transaction Form
State-Funded Positions

This Agreement:

☐ Enrolls an employee in a state-funded position

☐ Removes an employee from a state-funded position

☐ Name employee being replaced:_____

PERSONNEL AGREEMENT

Employee/System Information				
Last Name	**First Name**	**Middle Name**	**System Name**	
Last 4 of SSN#	**MLS Degree Date**		**License Effective Date**	**License Number**

Employment Information					
Date Enrollment Begins:		**Month/Day/Year**	**Date Enrollment Ends:**		**Month/Day/Year**
FTE			**FTE**		

It is agreed and understood that the person identified herein is employed for an approved program conducted under policies of the Georgia Public Library Service. The salary of the employee covered by this agreement is to be paid to the employee annually within the accepted range. The amount provided to the library system is a set amount according to the ZBB State Funding Formula of the Georgia Public Library Service and the laws of the State of Georgia. Approval is subject to compliance with state and federal laws and the availability of funds. In witness whereof, parties have affixed their signatures.

Requested by:

_____

Director or System Board Chair Date

E-Mail Signed Originals to:
Christopher A. Evans (Cevans@georgialibraries.org)
or Mail to:
Christopher A. Evans, Business Director
Georgia Public Library Service
1800 Century Place, NE, Suite 150
Atlanta, Georgia 30345-4311