

RETRAINING ADJUSTMENT PAY DIFFERENTIAL CALCULATION FORM

This form is to be used for calculating the retraining adjustment pay in accordance with Section 164, Subsection W of the Personnel Regulations and References of Santa Cruz County. This form must be submitted with the following documents:

- a. A memo from the department requesting the pay differential, including justification for the request,
- b. A memo from the employee indicating their acceptance of the voluntary demotion,
- c. A Personnel-Payroll Action Form which notes that the action is a voluntary demotion and Section 164.w. is to be implemented,
- d. A current County of Santa Cruz Application for Employment completed by the employee.
- e. Department Head approval justifying recommendation of retraining pay differential and approval by the Personnel Director.

	CLASS CODE	CLASS TITLE	PAY STEP	HOURLY RATE
Current Class	_____	_____	_____	_____
Class Demoting To	_____	_____	_____	_____

PAY DIFFERENTIAL (to be paid for 52 pay periods or until the employee leaves the classification to which they have demoted) _____

Department Head Recommendation

Date

Personnel Director Approval

Date