

PORTAGE COUNTY

Department: _____

Request for Transfer of Prior State Service Credit and Sick Leave

To Be Completed by Employee:

Name: _____

SS# _____

Address _____

City/ST/Zip _____

To Be Completed by Previous Public Employer:

Previous Employer: _____

Beginning and End Dates of Employment: _____

Employment Status: Full Time _____ Part Time _____ Seasonal _____

If there was a break in service, list dates: _____

Sick Leave Balance (in hours) _____

Do not include hours that were transferred to another employer*

Sick hours from other state agency(s) are included above: NO _____ YES _____

If yes, what agency(s) _____ No. of Hours _____

Certifying Officer's Signature

Date

Printed Name and Title

Phone Number

Return to: Portage County Auditor - Payroll

449 S. Meridian St

or email: agullett@portageco.com

PO Box 1217

Ravenna, OH 44266

It is the employee's responsibility to mail this form to previous state employer(s) to obtain service and sick leave credit. Prior service and sick leave credit will be transferred in accordance with the policies of Portage County and will be effective in the pay period in which it is received. Sick leave balance is transferable within 10 yrs following separation from previous eligible public agency with verification.

***Completed forms must be sent directly to new employer from previous employer. It is not to be sent directly to the employee for delivery.**