ADMINISTRATIVE PROCEDURES

Procedure Number: 23-42

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C. Richelberg
County Administrator

SUBJECT: **UNCLASSIFIED EMPLOYMENT TERMS AND CONDITIONS**

DEPARTMENT RESPONSIBLE: **Human Resources Department**
All Pima County Departments

I. PURPOSE

This procedure memorializes the terms and conditions of unclassified employment with Pima County and provides a means for informing the unclassified employee of his or her rights and at-will status.

II. PROCEDURES

New employees or current classified employees who accept an unclassified position with Pima County should acknowledge in writing that they understand and agree to the terms and conditions of unclassified employment on the Pima County Unclassified Terms and Conditions of Employment document (Attachment A). The completed document is to be attached to the Personnel Action Form (PAF) supporting this action and placed in the employee's Official Personnel File pursuant to Personnel Policy 8-118.C.2(e).

III. RESPONSIBILITY

It is the responsibility of Appointing Authorities to ensure that new hires or existing classified employees accepting an unclassified position acknowledge the at-will status in writing on the Pima County Unclassified Terms and Conditions of Employment document within forty-eight (48) hours following the commencement of employment. Appointing Authorities must also ensure that the completed document is attached to the PAF supporting this hiring action. However, failure to do so, does not change the at-will status of the unclassified employee, since the employee's copy of the personnel action form and other documents, when applicable, indicates his or her employment status. This form serves as support and additional notification to the affected employee.

Attachment A

PIMA COUNTY
UNCLASSIFIED POSITION
TERMS AND CONDITIONS OF EMPLOYMENT

Name _____, Pima County is pleased to acknowledge your selection for the position of_____ at a starting salary of $_____ annually. You will report to _____. Your starting date, reporting location and time are ____ _____.

1) I understand that in accepting this unclassified position I am employed at will and I may be terminated at anytime during my unclassified employment with Pima County, without cause and without recourse to the Pima County Merit System, except in cases of alleged unlawful discrimination.

2) I am aware that Pima County Government operates under a merit system and as an unclassified employee I am not subject to nor do I have protection under these rules. If I accept an unclassified position after having served in a different classified position, I acknowledge, fully understand and agree that the Pima County Merit System Rules no longer will apply to me, which includes my right to grieve or appeal employment actions except for alleged acts of discrimination.

3) I have been made aware that all Pima County employees must observe the basic work rule principles as set forth in the Pima County Personnel Policies, Board of Supervisors Policies, Pima County Administrative Procedures and departmental procedures.

4) I understand and agree to sign a State of Arizona Loyalty Oath, if one is not already on file.

5) I understand and agree that to change my employment status from an at-will employee to a regular classified employee shall require a competitive process pursuant to Merit System Rule 4.

6) In accepting this offer of employment, or if already employed, this change in employment status, I understand that all job applications I have submitted for classified employment will be removed from the Human Resources application files unless I submit a written request to the Human Resources Director for those applications to remain in an active status for the remainder of their eligibility period pursuant to Merit System 6.1.

7) I understand that annual and sick leave accruals and usage are set forth in Personnel Policies 8-105 and 8-106 respectively, unless I am already a County employee with rights to use my leave banks.

8) It is mandatory that a percent of my gross County salary (on pre-tax dollars) will be withheld each pay period and paid into my account in the Arizona State Retirement System as required by Arizona State Statute.

9) I understand and agree that I will read, be familiar with and comply with the Pima County Personnel Policies, Board of Supervisors Policies, Administrative Procedures and departmental procedures, where applicable.

Additional terms/conditions _____
_____
_____

I have read and understand the above and by my signature agree to them. If I have any questions regarding this document, I will call Human Resources/Employment Rights at 740-2728.

_____ _____
Signature Date

_____ _____
Signature of the Appointing Authority Date

Original – Official Personnel File (Attached to PAF) Copy – Department Copy – Employee