



Regional Transit Authority

Transfer

(HC33)

POLICY STATEMENT

The New Orleans Regional Transit Authority (RTA) allows non-represented employees to transfer from one department to another non-represented position in accordance with Human Capital procedures.

PURPOSE

To give qualified RTA employees the opportunity to transfer into departments and/or positions which enhance their careers, while also preserving management's right to assign employees into areas when appropriate.

APPLICATION

This policy applies to all non-represented at-will employees who have completed their initial probationary period.

APPROVED:

ADOPTED: Board Chair

Chief Executive Officer

Effective Date: _____

Date of Last Review: _____



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1.0 PROCEDURES

After a transfer, the employee will serve a new six-month probationary period. The sending and receiving departments must agree upon the transfer's effective date, and an Employee Action Form (EAF – see Attachment 1) must be completed and submitted.

A transferring employee should be released from the former position within 14 calendar days of the offer acceptance date. A transfer may not be delayed longer than 60 days without the approval of the Chief Human Resources Officer.

1.1 Types of Transfers

There are three types of transfers:

Employee-Initiated Transfer: Employees are eligible to transfer to positions at or below their current salary grade; which are either the same classification as the employee's current position, or a comparable position which requires the same or similar knowledge, skills, and abilities. If an employee wishes to move to another department, he/she must:

- Meet the minimum qualifications of the position for which he/she is applying.
- Pass any applicable exams, if transferring to a different job classification.
- Submit a completed Transfer Request Form (see Attachment 2) and current resume to the Human Capital Department.
- Have received an "Effective" rating or better on his/her most recent Individual Performance Plan (IPP), before being eligible to request an Employee-Initiated Transfer to an equivalent salary-grade position.

When a vacancy occurs, those candidates on the transfer list who most closely match the Ideal Candidate Profile for the vacancy being filled will be certified to the hiring authority for an interview.

Management-Initiated Transfer: Chiefs or higher in the RTA management hierarchy must approve a transfer when necessitated by changes in workloads, reorganization, or any other business reason.

Disability Transfer: If an employee becomes temporarily or permanently disabled and unable to perform the essential functions of his/her job, the employee may be reasonably accommodated by a transfer into a vacant, non-represented position with essential duties the employee can perform.



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1.2 Performance Evaluations

At the time of transfer, the employee's supervisor from the sending department will prepare an individual performance of the employee's work-to-date filing a copy with Human Capital, and in the employee's departmental file. The departmental file will be sent to the receiving department.

Following a transfer, the employee is subject to the requirements provided in the Probationary Period (HC32) policy, including performance evaluations after three and six months; and options and consequences if, after the six month evaluation, he/she receives a "Needs Improvement" performance rating.

2.0 DEFINITIONS

Comparable Classification – Positions at the same salary grade that require the same or similar knowledge, skills, abilities, and experience to perform the duties of the job.

Ideal Candidate Profile – An outline of the desired education, training, skills, abilities, and experience for a specific position as defined by the hiring department.

Initial Probationary Period – The first six months of continuous service from the date a new regular employee started work; any probation, including after a promotion, may be extended as appropriate based on evaluation of the employee.

Reassignment – A change in work responsibilities or job duties within an employee's work unit within the same or comparable job classification.

Transfer – The movement of an employee from one work unit to another, to a position at or below his/her current salary grade, which is either the same classification as the employee's current position, or a comparable position for which he/she meets the minimum qualifications.

3.0 RESPONSIBILITIES

Human Capital is responsible for administering this policy.

The chief of the employee's sending department is responsible for preparing and submitting the EAF; facilitating the agreed-upon release; conducting an Individual Performance Plan; and ensuring that the employee's files are forwarded to the appropriate departments.



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The chief of the employee's receiving department is responsible for outlining the employee's new job duties; accepting the employee into the department within the agreed-upon time frame; and conducting probationary reviews.

The employee is responsible for completing the Transfer Request Form, attaching a current resume, and taking any applicable, job-related exams.

4.0 FLOWCHART

N/A

5.0 REFERENCES

- Probationary Period (HC32)
- Individual Performance Plan (HC36)
- Termination of Employment (HC17)

6.0 ATTACHMENTS

1. Employee Action Form (EAF)
2. Transfer Request Form

7.0 PROCEDURE HISTORY

N/A

8.0 SPONSOR DEPARTMENT

Human Capital



EMPLOYEE ACTION FORM

Last Name	First Name	Middle	<i>**If Name change, attach new Social Security Card and W4</i>
Transaction #	Reason		

PERSONAL INFORMATION UPDATE – NEW HIRE INFORMATION

Address – City, State, Zip				Home Phone	Cell Phone
Marital Status	Gender	Date of Birth	Race/Ethnicity	Military Status	<input type="checkbox"/> Disabled Y <input type="checkbox"/> N <input type="checkbox"/> Disabled Yet Y <input type="checkbox"/> N <input type="checkbox"/> ID Verified Y <input type="checkbox"/> N
Hire Date	Rehire Date	Adjusted Hire Date	Highest Education Level Achieved	Referral Source	Specific Referral Name

JOB INFORMATION

Current Job Data / New Hire Data				Proposed Job Changes			
Location Name				Effective Date of Change		New Location Name	
Payroll Dept		Union Name		New Payroll Dept		New Union Name	
Job Code /		File #		New Job Code / Job Title		New File #	
Employee Type		Standard Hrs		New Employee Type		New Standard Hrs	
Hourly <input type="checkbox"/> or <input type="checkbox"/> Salary	Pay Group		Hourly <input type="checkbox"/> or <input type="checkbox"/> Salary		New Pay Group		
Temp <input type="checkbox"/> or <input type="checkbox"/> Perm	Co. Car <input type="checkbox"/> Y <input type="checkbox"/> or			Temp <input type="checkbox"/> or <input type="checkbox"/> Perm	Co. Car <input type="checkbox"/> Y <input type="checkbox"/> or		
FT <input type="checkbox"/> or <input type="checkbox"/> PT	Car Allowance \$		FT <input type="checkbox"/> or <input type="checkbox"/> PT		New Car Allowance \$		
Supervisor Name				New Supervisor Name			

SALARY CHANGES

Current Salary (Hourly or Annual)			Increase Information			
Hourly Rate	Annual Salary	Bonus Target %	Effective Date	Review Rating		
			Increase Total \$	Next Review Date		
Date of Last Increase			% of Merit Incr	0.00%	% of Adj Incr	0.00%
Review Date			% of Promo Incr	0.00%	Total %	0.00%
			New Hrlly Rate	New Annual Salary	New Bonus Target %	

LEAVE OF ABSENCE

First Day of LOA	Expected LOA Return	<input type="checkbox"/>
Actual LOA Return Date	FMLA	<input type="checkbox"/> Y <input type="checkbox"/> N

SEPARATION (Payout types may not apply to all properties & States)

Separation Date	Last Day Worked	Pay Thru Date
Severance <input type="checkbox"/> Y <input type="checkbox"/> N	# Hours Owed	Vacation Floating <input type="checkbox"/>
		Other Eligible for Rehire <input type="checkbox"/> Y <input type="checkbox"/> N

SIGNATURES (Certain Signatures May be Required for Agency Salary Guidelines)

	Print Name	Signature	Date
Initiator / HR Employee Engagement (for demographic/name changes)			
1 st Level of Approval Title: Supervisor/Manager			
2 nd Level of Approval Title: Director			
3 rd Level of Approval Title: Officer			
4 th Level of Approval Title: Chief HR			
5 th Level of Approval Title: CEO			
6 th Level of Approval Title:			

ADDITIONAL REMARKS

HUMAN RESOURCES USE ONLY

Date Rec'd	Date Input	Initials	Payroll Effective Date
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EMPLOYEE ACTION FORM INSTRUCTIONS

FOR ALL TRANSACTIONS	<p>Top of Form</p> <ul style="list-style-type: none"> • Transaction Type – Choose from the drop down list (ie. Separation) – REQUIRED FOR ALL ACTIONS • Reason – Provide the reason for the transaction REQUIRED FOR ALL ACTIONS
NEW HIRE	<p>Personal Information Update – New Hire Information Section</p> <ul style="list-style-type: none"> • Complete all fields <ul style="list-style-type: none"> ○ For hire dates, used Adjusted Hire Date to give service credit for prior Company Service (ie: Veolia, Transdev, etc.) <p>Job Information Section</p> <ul style="list-style-type: none"> • Complete left side of this section <ul style="list-style-type: none"> ○ Location Name – name of property ○ Payroll Dept – enter Payroll Dept # ○ Union Name – if union employee provide union code or name ○ Job Title – name of position ○ File # - This is auto assigned when employee is entered into ADP ○ Employee Type – Select one in each category: Hourly or Salary, Temp or Perm, FT or PT ○ Standard Hours – enter hours scheduled to work per week ○ Pay Group – enter Pay Group employee is to be paid ○ Car Allowance – if applicable, enter amount eligible for ○ Co Car – Select Yes or No if the employee is given a company vehicle ○ Supervisor Name – provide full name of direct supervisor <p>Salary Changes Section</p> <ul style="list-style-type: none"> • Complete left side of this section <ul style="list-style-type: none"> ○ Hourly Rate – if hourly employee provide hourly rate ○ Annual Rate – if salaried employee provide annual rate ○ Bonus Target % - if employee is bonus eligible provide bonus target ○ Date of Last Increase – enter hire date ○ Review Date – enter next review date <p>Signatures Section – obtain appropriate signature for new hire transaction</p>
JOB CHANGE	<p>Job Information Section</p> <ul style="list-style-type: none"> • Current Job Data (left side of section) <ul style="list-style-type: none"> ○ Complete entire section with current job information • Proposed Job changes – ALL PAY GROUP TRANSFERS MUST GO THROUGH Human Resources/Human Capital <ul style="list-style-type: none"> ○ Enter Effective Date of Proposed Change ○ Complete entire section with new job information ○ If employee is transferring pay groups, new File # will be assigned for employee upon entry into ADP. <p>Salary Changes Section</p> <ul style="list-style-type: none"> • Provide current salary information (left side of section) <ul style="list-style-type: none"> ○ Hourly Rate – if hourly employee provide current hourly rate ○ Annual Rate – if salary employee provide current annual rate ○ Bonus Target % - if bonus eligible provide current bonus target • Provide increase information (right side of section) <ul style="list-style-type: none"> ○ Enter Effective Date of Proposed Change ○ Review Rating – provide employee's latest review rating ○ Increase Total \$ - provide amount of increase in dollars ○ Enter % of increase – Merit, Promotion or Adjustment (form will automatically calculate total%) ○ Enter new hourly or annual rate & bonus target (if applicable) <p>Signatures Section – Obtain appropriate signature for job change transaction</p>
LEAVE OF ABSENCE	<p>First Day of LOA – Provide first day employee missed work due to leave</p> <p>Expected LOA Return – Provide date employee is expected to return to work</p> <p>Actual LOA Return Date – Provide date employee returned to work</p> <p>Signatures Section – Obtain appropriate signature for leave of absence transaction</p>
SEPARATION	<p>Separation Date – Provide date of employee separated</p> <p>Last Day Worked – Provide date employee was last at work</p> <p>Severance – Select Yes or No if the employee is eligible for Severance</p> <p>Pay Thru Date – Provide date the employee should be paid thru</p> <p>Hours Owed – Provide number of vacation, floating holidays and/or sick hours employee is owed (if any) Also include any other time due as part of a Collective Bargaining Agreement (i.e. PTO).</p> <p>Signatures Section – Obtain appropriate signature for separation transaction</p>
NAME / ADDRESS CHANGE	<p>Provide new name or address for employee and provide any necessary documentation for change</p> <p>Employee should sign off on these types of changes. They can sign on the initiator line.</p>

DATE: [REDACTED]

TO: Darwyn B. Anderson
danderson@rtaforward.org
Chief Human Resources Officer

FROM: [REDACTED]

SUBJECT: TRANSFER REQUEST **(RESUME MUST BE ATTACHED)**

I would like to be considered for a transfer. **I have attached a current resume to this request. I understand the request is valid for eighteen months from the date it is approved by the Talent Acquisition Department or until a transfer is completed.** I understand that I:

- May only be considered for a classification at or below my current salary grade
- Must meet the minimum qualifications of the classification to which I request to transfer
- Pass any applicable exams, if transferring to a different job classification
- Have received an "Effective" rating or better on the most recent Individual Performance Plan (IPP)
- Understand when a vacancy occurs in the interested classification, those candidates who most closely match the Ideal Candidate Profile for the vacancy being filled will be certified to the hiring department for consideration
- Must notify the Talent Acquisition, if I would like any changes to be made, or if I no longer desire to be considered for a transfer.

NAME	[REDACTED]	BADGE#	[REDACTED]
CURRENT DEPARTMENT	[REDACTED]	EXTENSION	[REDACTED]
CURRENT JOB CLASSIFICATION	[REDACTED]		

- I am interested in being considered for any **vacancies within my classification and in any department.**
- I am interested in being considered for any **vacancies within my classification for the following departments only:**

[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]

I am interested in being considered for any **vacancies within the following classifications:**

<u>Classification</u>	<u>Official Use</u>
[REDACTED]	Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>
[REDACTED]	Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>
[REDACTED]	Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>
[REDACTED]	Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>

Official Use Only	
Date Approved: _____	Request Expires: _____ Date Logged: _____
Approved By (Print Name): _____	Signature: _____
Notes: _____ _____	

