

PERSONNEL MASTER CHANGE NOTICE FOR YOUTH CONSERVATION CORPS ENROLLEES

EMPLOYEE NAME _____
DATE PREPARED _____
PREPARED BY _____
REVIEWED BY _____

DATA ELEMENT (131) (129) (136)

DOCUMENT CONTROL NUMBER			
DATA TYPE	SUBMITTING OFFICE NO	PERS OFF	SEQUENCE NUMBER
A	22		

AREA	TABLE NO.	AREA	TABLE NO.
DCN (4-7)	19	A2 (06)	10
DCN (8-9)	12	A3 (01)	19
A1 (03)	3/10/12/19/26/60	A3 (02)	12
A1 (04)	3/10/12/19/26/60	A3 (03)	60
A2 (03)	8	A3 (06)	04
A2(04)	8		

DATA ELEMENT (130) (130A) (001) (002) (1258) (004) (004A) (016)

RECORD IDENT	RECY TRAN	MAST TRAN	DEPT	BUR	ACTION RELEASE CODE	SOCIAL SECURITY NUMBER	CHK DIG	EMPLOYEE NAME	BIRTH DATE			SEX	CITIZ	CONTROL TOTAL	UNASSIGNED
									YR	MO	DAY				
A	1		I	N	Y	F									

DATA ELEMENT (087) (087A) (086) (086A) (062) (009) (050) (088) (031) (032) (532) (531A) (531)

RECORD IDENT	EFFECTIVE DATE			NATURE OF ACTION		NOT TO EXCEED			ORGANIZATION CODE	SALARY/PAY RATE	NATURE OF ACTION DESCRIPTION INSERT (for correcting SSN or DOB)	RACE	HDCP CODE	YEARS OF EDUC	POPULATION	IND INCOME	UNASSIGNED
	YR	MO	DAY	HR	CODE	LT	YR	MO									
A	2																

DATA ELEMENT (005) (129) (003) (200) (202) (007)

RECORD IDENT	SUBMITTING OFFICE NO.	SERVCG PERS OF	SUB BUR	PAY BLOCK	TIME KEPR DELV CODE	DUTY STATION			UNASSIGNED
						ST	CITY	COUNTY	
A	3								

DOCUMENT TOTAL ()