



WORK PROGRAM ASSIGNMENT/CHANGE/TERMINATION

Name: _____ DOC number: _____ Unit: _____
 Earned release date: _____ GED/High school diploma? No Yes
 Health/accommodation status report effective? No Yes, end date: _____

CURRENT ASSIGNMENT

Class: I II III IV Department of Natural Resources Gate card access
 Program title: _____ Effective: _____ Suspension/end date: _____

COMPLETED BY WORK SUPERVISOR

New Reassign Promote Disciplinary action Terminate Suspend Remove from wait list

Reason(s): (attach supporting documents)

Assignment complete Violation Excessive tardiness Unexcused absences
 Pending investigation Behavior Technical skills Security/disruption concerns
 Other: _____

Action(s) taken: (e.g., disciplinary, administrative, corrective)

Hours: _____ to _____ Sun Mon Tue Wed Thu Fri Sat

 Work crew supervisor Signature Date

FACILITY RISK MANAGEMENT TEAM (FRMT) REVIEW

Terminate Return to current assignment Reassign area/position Wait list removal
 Promote Suspend current assignment Maintain gate card Remove gate card
 Violation Number: _____ Date: _____ Other: _____

WAITING LIST

Current	Approved
1.	1.
2.	2.
3.	3.

Comments:

 FRMT chair Signature Date

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.

Distribution: **ORIGINAL** - Assignment Lieutenant/Resource Program Management employees
COPY - Work Crew Supervisor, Case manager