



Jamie Favre <jfavre@baystlouis-ms.gov>

Raven Sikes probation completed

3 messages

Alvin Kingston <akingston@baystlouis-ms.gov>
To: Jamie Favre <jfavre@baystlouis-ms.gov>

Tue, Mar 18, 2025 at 11:54 AM

Jamie,

Officer Raven Sikes has satisfactorily completed all training and probation period of one year. Today March 18, 2025 is her hire anniversary. As such, I request her pay rate reflect that of a certified full time police officer for the Bay St. Louis Police Department's current base pay rate.

Please add to the next council agenda on April 8, 2025 a payroll change for Raven Sikes changing from \$22.50 to the base rate of patrol officer at \$23.26. This salary is already budgeted and does not require a budget amendment. The pay change will go in to affect for the pay period starting March 31, 2025.

Please let me know if you have any questions.

Thank You,

Alvin K

Deputy Chief Alvin Kingston

Bay St. Louis Police Department

547 Main Street

Bay St. Louis, MS 39520

PD Main: 228-467-9222

Direct: 228-466-5492



PAYROLL CHANGE NOTICE

DATE OF CHANGE 3-31-25	EMPLOYEE #	SOCIAL SECURITY NO -	
NAME Raven Sikes		ADDRESS	
PHONE	CITY/STATE/ZIP	DEPARTMENT Police	SHIFT

THE CHANGE(S):

✓ All Applicable Boxes	FROM	TO
<input type="checkbox"/> DEPARTMENT		
<input type="checkbox"/> JOB		
<input type="checkbox"/> SHIFT		
<input checked="" type="checkbox"/> RATE	\$22.50/hr.	\$23.25/hr.
<input type="checkbox"/> ADDRESS/PHONE		
<input type="checkbox"/> BENEFIT PLAN		
<input type="checkbox"/> OTHER _____		
<input type="checkbox"/> OTHER _____		

THE REASON FOR THE CHANGE(S):

<input type="checkbox"/> HIRED	<input type="checkbox"/> PROBATIONARY PERIOD COMPLETED
<input type="checkbox"/> RE-HIRED	<input type="checkbox"/> LENGTH OF SERVICE INCREASE
<input type="checkbox"/> PROMOTION	<input type="checkbox"/> RE-EVALUATION OF EXISTING JOB
<input type="checkbox"/> DEMOTION	<input type="checkbox"/> RESIGNATION
<input type="checkbox"/> TRANSFER	<input type="checkbox"/> RETIREMENT
<input type="checkbox"/> MERIT INCREASE	<input type="checkbox"/> LAYOFF
<input type="checkbox"/> WAGE SCALE CHANGE	<input type="checkbox"/> DISCHARGE
<input type="checkbox"/> LEAVE OF ABSENCE FROM _____ (DATE) UNTIL _____ (DATE)	
TYPE OF LEAVE _____	
<input type="checkbox"/> OTHER (Explain) _____	

AUTHORIZATION:

EMPLOYEE SIGNATURE	DATE
SUPERVISOR SIGNATURE	DATE
HUMAN RESOURCES MANAGER Jamie E. David	DATE 3-18-25



Rev 3/16

Re-order Form #08320 ©copyright 2022 Amsterdam Printing, Amsterdam, N.Y. 12010
Toll Free 1-866-466-1438 or online www.amsterdamforms.com

Amsterdam