

# PAYROLL STATUS CHANGE

NAME: \_\_\_\_\_

Effective Date \_\_\_\_\_

EP  DL LOCATION \_\_\_\_\_

PrintStream # \_\_\_\_\_

## REASON FOR CHANGE

Hired ( Full Time  Part Time)

90-day Review

Termination

Rehired ( Full Time  Part Time)

Merit Increase

Layoff

Other \_\_\_\_\_

Promotion/Transfer

Resignation

Comments: \_\_\_\_\_

\_\_\_\_\_

### CURRENT

### NEW

	CURRENT	NEW
Position		
Department		
Shift		
Manager		
Base Pay		
Shift Differential/Lead Pay		
TOTAL		

Next Review Date: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Requested by: \_\_\_\_\_

Exec. Approval: \_\_\_\_\_