



Payroll status change

EFFECTIVE DATE: / /

EMPLOYMENT PAYROLL INFORMATION			
NAME: _____		PAYROLL # _____	
NEW ADDRESS	Street _____		Social Security # _____
	City _____	State _____	Zip _____
	Date of birth _____		
	Phone _____		

HIRING INFORMATION	
JOB	_____
DEPARTMENT	_____
SHIFT	_____
PAY	<input type="checkbox"/> HOURLY <input type="checkbox"/> ANNUAL

REASON FOR CHANGE		
<input type="checkbox"/> HIRED	<input type="checkbox"/> MERIT INCREASE	<input type="checkbox"/> LENGTH OF SERVICE INCREASE
<input type="checkbox"/> REHIRED	<input type="checkbox"/> RESIGNATION	<input type="checkbox"/> REEVALUATION OF CURRENT JOB
<input type="checkbox"/> PROMOTION	<input type="checkbox"/> RETIREMENT	<input type="checkbox"/> PROBATION PERIOD COMPLETED
<input type="checkbox"/> DEMOTION	<input type="checkbox"/> LAYOFF	<input type="checkbox"/> UNION CONTRACT
<input type="checkbox"/> TRANSFER	<input type="checkbox"/> DISCHARGE	<input type="checkbox"/> _____
COMMENTS, IF NECESSARY _____		

LEAVE OF ABSENCE	
FROM: _____ / ____ / ____	TO: _____ / ____ / ____
CHARGED TO VACATION <input type="checkbox"/> Yes <input type="checkbox"/> No	FAMILY LEAVE ACT <input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER, EXPLAIN: _____	

AUTHORIZED BY: _____ APPROVED BY: _____