|  |  |  |  |
| --- | --- | --- | --- |
| EMPLOYEE NAME |  | DATE of FORM |  |
| EMPLOYEE ID |  | DATE EFFECTIVE |  |
| POSITION TITLE |  | DEPARTMENT |  |

**PAYROLL CHANGE FORM TEMPLATE**

**TYPE OF REQUEST**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | NEW EMPLOYMENT | BEGIN DATE |  | END DATE | OPEN |
|  | AVG DAILY HRS |  | START TIME |  | END TIME |  |
|  | LENGTH OF UNPAID BREAKS |  | LENGTH OF PAID BREAKS |  |
|  | HOURLY RATE |  | SALARY AMT |  |
|  | CONTRACT POSITION | INITIAL RATE |  | REVISED RATE |  |
|  | CHANGE OF POSITION | INITIAL RATE |  | REVISED RATE |  |
|  | CHANGE OF RATE | INITIAL RATE |  | REVISED RATE |  |
|  | LEAVE OF ABSENCE | INITIAL RATE |  | REVISED RATE |  |
|  | TERMINATION (COMPLETE SECTION BELOW) |  | RESIGNATION (COMPLETE SECTION BELOW) |  | OTHER |
|  | IF “OTHER,” EXPLAIN |  |
|  | ATTENDANCE |  |
|  | PUNCTUALITY |  |
|  | JOB PERFORMANCE |  |
|  | EVALUATION COMMENTS |  |
|  | AREAS OF CONCERN |  |
|  | IS RE-EMPLOYMENT AN OPTION? |  | YES |  | NO | WHY? |  |

**REASON FOR RECOMMENDATION**

|  |  |
| --- | --- |
| STATEMENT OF NEED  |  |
| SPECIAL NOTES  |  |

**AUTHORIZATION**

|  |  |  |  |
| --- | --- | --- | --- |
| DIRECT SUPERVISOR |  | DATE |  |
| FINANCE DEPARTMENT |  | DATE |  |
| EXECUTIVE DIRECTOR |  | DATE |  |