# Payroll Change Form Template

Employee Name	Date of Form	
Employee ID	Date Effective	
Position Title	Department	

# Type of Request

New Employment	New Employment					Begin Date				End Date	•	
Avg Daily Hours				Start	Time	me		End Time	,			
Length of Unpaid Breaks								Length of Paid Breaks				
Hourly Rate						Salary Amt						
Contract Position	t Position				Initio	nitial Rate			Revised R	ate		
Change of Position				Initio	Initial Rate		Revised Rate					
Change of Rate					Initio	Initial Rate		Revised Rate		ate		
Leave of Absence	Leave of Absence					Initio	ıl Rate	Revised			ate	
Termination (Complet	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	D	Date	
Finance Department	D	Date	
Executive Director	D	Date	

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