



Employee Details:

| | |
|---------------------|--|
| Employee Full Name: | |
| Current Position: | |
| Department: | |
| Employee ID: | |

Type of Change (check all that apply):

New Hire
 Position Change
 Department Change
 Pay Rate Change

Other (specify): _____

Change Details:

New Hire:

State Date: _____ Job Title: _____ Department: _____

Employment Type:

Full-time
 Part-time
 Seasonal/Temporary
 Starting Pay: _____
 Hourly
 Annual

Department/Position Change:

New Job Title: _____ New Department: _____ Start Date: _____

Employment Type:

Full-time
 Part-time
 Seasonal/Temporary
 New Pay: _____
 Hourly
 Annual

Employee Name: _____

Signature: _____ Date: _____

Supervisor/Manager Name: _____

Signature: _____ Date: _____

Human Resources Representative Name: _____

Signature: _____ Date Reviewed: _____