

Personnel Change Notice

Employment Terminate Change

Explanation _____

Employee	Employee #	S. S. #	Grade Level
Address	City	State	Phone
Job Title	Department	Location	Phone

Employment

<input type="checkbox"/> New Hire <input type="checkbox"/> Rehired <input type="checkbox"/> Temporary <input type="checkbox"/> Part Time <input type="checkbox"/> Replacement For:						
Hire Date	Start Date	Age	Sex	Marital Status	Education	Shift

Termination

<input type="checkbox"/> Voluntary <input type="checkbox"/> Involuntary		Last Day Worked	Pay Through Date	Rehire? <input type="checkbox"/> Y <input type="checkbox"/> N
Hire Date	Start Date	Paid Days Accrued	Severance Pay Approved? <input type="checkbox"/> Y <input type="checkbox"/> N	

Change

<input type="checkbox"/> Rate/Salary <input type="checkbox"/> Job <input type="checkbox"/> Location		Leave Of Absence: From _____ To _____		
Location Change		To:	From:	
Job And Salary Change	Old Title/Salary		New Title/Salary	

Comments

Approval Signatures

Prepared By:	Date	Supervisor:	Date
Audited By:	Date	Personnel:	Date
Employee:	Date	Personnel:	Date