



Transfer Request

Employee Name: Davin Sam

Date: 3/15/16

Current Shift/Dept.: 3rd

Shift Requesting: 2nd

Reason: ~~school~~ It doesn't work well with the school's schedule.

Date of Requested Transfer: as soon as possible

Office Use Only

Attendance: Written on 3/16/16

Work Performance: PR on 6/23/15 score 3.85

Available Opening: _____

CMG Approval: Kelsey Adell

Operations Manager Approval: _____

Work Restrictions: N/A

Current Wage: 13.23 ^{+2.00 = 15.23} New Wage: _____

Hire Date: 6/20/13

Payroll/Status Change Notice

Employment Agency

Effective Date: ____/____/____

Employee: Last: _____ First: _____ Middle: _____

Department: _____

Change(s)	From		To (or New Hire)	
	\$	Per	\$	Per
Salary/ Wage	\$	Per	\$	Per
Other	\$	Per	\$	Per

Reason For Change(s)

- Demotion
- Dept. Transfer
- New Hire
- Layoff
- Other
- Merit Increase
- Probation Complete
- Promotion
- Reevaluation
- Rehired
- Resignation
- Retirement
- Transfer

Leave of Absence

- Educational
- Military
- Other
- Medical
- Family Leave
- Personal

Comments: _____

Office Use Only:

Last 3 Pay Increase (Date, From/To Amount, & Reason):

Date: ____/____/____ From: \$ ____ To: \$ ____ Reason: _____

Date: ____/____/____ From: \$ ____ To: \$ ____ Reason: _____

Date: ____/____/____ From: \$ ____ To: \$ ____ Reason: _____

Change Authorized By: _____ Date: ____/____/____

Change Approved By RF: _____ Date: ____/____/____

Change Approved By Agency: _____ Date: ____/____/____

Payroll/Status Change Notice

Employment Agency

Effective Date: ____/____/____

Employee: Last: _____ First: _____ Middle: _____

Department: _____

Change(s)	From		To (or New Hire)	
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Leave of Absence

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- Other
- Medical
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Comments: _____

Office Use Only:

Last 3 Pay Increase (Date and From/To Amount):

Date: ____/____/____ From: \$ ____ To: \$ ____ Reason: _____

Date: ____/____/____ From: \$ ____ To: \$ ____ Reason: _____

Date: ____/____/____ From: \$ ____ To: \$ ____ Reason: _____

Change Authorized By: _____ Date: ____/____/____

Change Approved By RF: _____ Date: ____/____/____

Change Approved By Agency: _____ Date: ____/____/____