CMG

Transfer Request

Employee Name: _Abdi Noor_

Date: _10/26/15_

Current Shift/Dept.: _1st Shift_

Shift Requesting: _2nd Shift_

Reason: _Kids_

Date of Requested Transfer: _11-23-15_

Office Use Only

Attendance: _Perfect_

Work Performance: _PR not done yet_

Available Opening: _yes_

CMG Approval: _Kelsey A_____

Operations Manager Approval: _MSchumacher_

Work Restrictions: _N/A_

Current Wage: _11.00_ New Wage: _____

Hire Date: _8/19/15_

09/2011

Payroll/Status Change Notice — Employment Agency

Effective Date ____ / ____ / ____

Employee _____
Last _____ First _____ Middle _____

Department _____

Change(s)

Salary/ Wage	From		To (or New Hire)	
	$ ____	$ ____ 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: ____ / ____ / ____