



**Transfer Request**

Employee Name: HIEP DAO

Date: 7/14-15

Current Shift/Dept.: MV2 (1ST)

Shift Requesting: HOMEL 2

Reason: logistics, take same ride

Date of Requested Transfer: ~~7/14/15~~ 8/03/15

Office Use Only

Attendance: Great

Work Performance: PR on 5/12/15 score 4.85

Available Opening: \_\_\_\_\_

CMG Approval: Kelsey Adell

Operations Manager Approval: M. Schmacher

Work Restrictions: N/A

Current Wage: 10.00 New Wage: N/A *je*

Hire Date: 2/9/15

# Payroll/Status Change Notice

## Employment Agency

Effective Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Employee Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Department \_\_\_\_\_

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

### Reason For Change(s)

- Demotion
- Dept. Transfer
- New Hire
- Layoff
- Other
- Merit Increase
- Probation Complete
- Promotion
- Reevaluation
- Retired
- 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)
Salary/Wage	\$ _____ Per _____	\$ _____ Per _____
Other	\$ _____ Per _____	\$ _____ Per _____

### Reason For Change(s)

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

### Leave of Absence

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

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: \_\_\_\_/\_\_\_\_/\_\_\_\_