



Transfer Request

Employee Name: Jose Truino

Date: 10/31/14

Current Shift/Dept.: 1st T/S

Shift Requesting: 3rd Sanitation

Reason: Better pay

Date of Requested Transfer: _____

Office Use Only

Attendance: Good

Work Performance: PR on 10/29/14 score 4.4.

Available Opening: yes

CMG Approval: Kelsey Adickel

Operations Manager Approval: _____

Work Restrictions: n/a

Current Wage: \$11.22 New Wage: _____

Hire Date: 10/22/13

Payroll/Status Employment Agency Change Notice

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
 - 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 Employment Agency Change Notice

Effective Date _____ / _____ / _____

Employee _____
Last First Middle

Department _____

Change(s)

	From	To (or New Hire)
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- Leave of Absence**
- Educational
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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: _____ / _____ / _____