



Transfer Request

Employee Name: King Fong chy

Date: 03.10.14

Current Shift/Dept.: 2nd shift

Shift Requesting: ~~2nd shift~~ 1st shift

Reason: I have school for evening

Date of Requested Transfer: ~~1st shift~~ 03-10-14 ASAP

Office Use Only

Attendance: Great

Work Performance: PR on 4/18/13 score 4.71

Available Opening: _____

CMG Approval: Kelsey Adickel

Operations Manager Approval: _____

Work Restrictions: N/A

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
- Relieved
- 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)
Salary/ Wage	\$ _____ Per _____	\$ _____ Per _____
Other	\$ _____ Per _____	\$ _____ Per _____

Reason For Change(s)

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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: ___/___/___