



## Transfer Request

Employee Name: Maria Negron

Date: 10/31/14

Current Shift/Dept.: 1<sup>st</sup> QC Tech

Shift Requesting: 1<sup>st</sup> North Production

Reason: Does not like being a QA tech.

Date of Requested Transfer: \_\_\_\_\_

Office Use Only

Attendance: Great

Work Performance: PR on 11/18/14 score 4.71.

Available Opening: yes

CMG Approval: Keyey Achilli

Operations Manager Approval: \_\_\_\_\_

Work Restrictions: N/A

Current Wage: \$10.25 New Wage: \_\_\_\_\_

Hire Date: 8/18/14

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

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