



Transfer Request

Employee Name: Lawrence Chaw

Date: 11/26/14

Current Shift/Dept.: 1st GMP South

Shift Requesting: 1st Production

Reason: Try to become a MO

Date of Requested Transfer: 12/8th/14

Office Use Only

Attendance: Great

Work Performance: PR on 2/25/14 score 4.00

Available Opening: Yes

CMG Approval: Kelsey Siblink

Operations Manager Approval: M. Schirmer

Work Restrictions: N/A

Current Wage: \$10.20 New Wage: \$12.00

Hire Date: 2/4/13

Payroll/Status Change Notice

Employment Agency

Effective Date 12, 8, 14
 Employee CHOW ^{Last} LAWRENCE ^{First} MO ^{Middle}
 Department QA - Production

Change(s)

	From	To (or New Hire)
X Salary/Wage	\$ 1020 Per hr	\$ 1200 Per hr
Other	\$ Per	\$ Per

- Reason For Change(s)**
- Demotion
 - Merit Increase
 - Dept. Transfer
 - Probation Complete
 - New Hire
 - Promotion
 - Layoff
 - Reevaluation
 - Other
- Reired
 - Resignation
 - Retirement
 - Transfer

- Leave of Absence**
- Educational
 - Medical
 - Military
 - Family Leave
 - Other
 - 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 J. Campbell Date: 12-1-14
 Change Approved By _____ Date: _____
 Change Approved By Agency: _____ Date: _____

*per Mills's e-mail

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
 - Merit Increase
 - Dept. Transfer
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- Leave of Absence**
- Educational
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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: _____