



Transfer Request

Employee Name: Marvin Short

Date: 12/17/14

Current Shift/Dept.: 1st MV

Shift Requesting: 3rd

Reason: Daycare

Date of Requested Transfer: _____

Office Use Only

Attendance: Good

Work Performance: Has not had a PR yet

Available Opening: Yes

CMG Approval: Kelsey Sikkink

Operations Manager Approval: _____

Work Restrictions: N/A

Current Wage: \$9.50 New Wage: _____

Hire Date: 11/17/14

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

- 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: _____ 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)**
- Demotion
 - Merit Increase
 - Reired
 - Dept. Transfer
 - Probation Complete
 - Resignation
 - New Hire
 - Promotion
 - Retirement
 - Layoff
 - Reevaluation
 - Transfer
 - Other

- Leave of Absence**
- Educational
 - Medical
 - Military
 - Family Leave
 - Other
 - 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: _____ / _____ / _____