

# Employee Department/Position Change Request Form

Employee Name: MATT WEIKERT  
 Home Department: PATTIES  
 New Department: GRINDING  
 Reason for Change: NEED NEW GRINDER  
 Requested Date: 12/27/16  
 Interim Review Due: 1/27/17

Training Needed:

	Date	Initials	Hands On	Issued
JSA's				
LOTO	8/18/16	NR	NR	NR
Pallet Jack	8/8/16	NR	NR	NR

### Supplies

	Needed	Issued
Tools	N/A	N/A
Boots	Y	12/27
Safety Glasses	Y	12/27

Requested by: NICK RABICH Production Supervisor Date 12/22/16  
 Approved by: [Signature] Operations Manager Date 12/22/16  
 Approved by: \_\_\_\_\_ Human Resources Date \_\_\_\_\_  
 Approved by: \_\_\_\_\_ CMG Date \_\_\_\_\_

### HR ONLY

PRC Applicable? Yes  No

Initiated \_\_\_\_\_ Effective Date: \_\_\_\_\_

### Employee Acknowledgement

I acknowledge that I have reviewed the attached JSA's and understand the safety precautions required to perform this job.

Printed Name: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_