



Employee Change Form

Name: Michael Wenning Employee ID: _____
First Middle Last

CHANGE of Position, Department, Salary or Other Status

Hourly Only

	Dept. No.	Job Title	Salary	Full/Part Time	Grade	Min	Mid	Max	Other - (i.e. shift, team)
Current Status	960	Maint Tech	18 ⁰⁰						
New Status	942	Operator Const	14 ⁰⁰						

EFFECTIVE DATE: 12/25/16

EXPLANATIONS - Justification for hires and status changes

Promotion / Transfer 1) Replacing: _____ or 2) Filling newly approved position

FOR USE OF HUMAN RESOURCES OR PAYROLL

Social Security No. _____ Pos. No. _____ Job No. _____ I-9 _____ W-4 _____ A Rate _____

Exempt / Nonexempt _____ Misc. _____

APPROVALS

Supervisor [Signature] Date 12-20-16

Plant Manager [Signature] Date 12-20-16

Human Resources Susan C Block Date 12/21/16