



## Transfer Request

Employee Name: Okusola Sojoke

Date: 7-23-15

Current Shift/Dept.: 2nd North

Shift Requesting: 2nd South

Reason: Transportation

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

Office Use Only

Attendance: Great

Work Performance: PR not done yet

Available Opening: \_\_\_\_\_

CMG Approval: Kelsey Adithi

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

Work Restrictions: n/a

Current Wage: 9.50 New Wage: \_\_\_\_\_

Hire Date: 6/29/15

# Payroll/Status Change Notice

# Employment Agency

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

# Payroll/Status Change Notice

# Employment Agency

Effective Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Employee Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

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- Military
- Other \_\_\_\_\_
- Medical
- Family Leave
- 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: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_