



Transfer Request

Employee Name: Rachny Som

Effective Date: 9/23/19

Current Shift/Dept.: 2nd North

Shift Requesting: 1st North

Reason: Day Care

Employee Signature: _____

Office Use Only

Attendance: Great

Work Performance: 4.75 (90 day 7/15/19)

Available Opening: _____

CMG Approval: Kelsey Sikkink

Department Manager Approval: *M. Schmidt*

Work Restrictions: N/A

Current Wage: \$12.50 New Wage: NA

Hire Date: 4/15/2019

09/2011

HR Initials *U*