



## Transfer Request

Employee Name: Amina Nur

Effective Date: 9/08/2020

Current Shift/Dept.: 2N seasonal production

Shift Requesting: 2N seasonal weekends only

Reason: No Day care

Employee Signature: \_\_\_\_\_

Office Use Only

Attendance: Good

Work Performance: N/A

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

CMG Approval: Kelsey Sikkink

Department Manager Approval: [Signature]

Work Restrictions: N/A

Current Wage: \$14.00 New Wage: NA

Hire Date: 6/29/2020

HR Initials [Signature]