



Transfer Request

Employee Name: Trinidad Hernandez

Date: 3/10/15

Current Shift/Dept.: 2<sup>nd</sup> DC

Shift Requesting: 2<sup>nd</sup> North

Reason: \_\_\_\_\_

Date of Requested Transfer: 3/10/15

Office Use Only

Attendance: Great

Work Performance: has not had PR yet

Available Opening: yes

CMG Approval: Kelsey Adill

Operations Manager Approval: McKinnon

Work Restrictions: W/A

Current Wage: 12.00 New Wage: 9.50

Hire Date: 2/26/15

# Payroll/Status Change Notice

# Employment Agency

Effective Date 3 / 10 / 15

Employee Hernandez Trinidad  
Last First Middle

Department \_\_\_\_\_

### Change(s)

	From	To (or New Hire)
Salary/Wage	\$ 12 - Per	\$ 9.50 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 Abraham Date 3.10.15

Change Approved By RF \_\_\_\_\_ Date \_\_\_\_\_

Change Approved By Agency \_\_\_\_\_ Date \_\_\_\_\_

# Payroll/Status Change Notice

# Employment Agency

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

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

Department \_\_\_\_\_

### Change(s)

	From	To (or New Hire)
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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 \_\_\_\_\_