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EMPLOYEE STATUS CHANGE
(PLEASE USE ONE SHEET PER EMPLOYEE)

CLIENT NAME: _____ **DATE:** _____

NEW HIRE (please attach W-4, HW-4, I-9, and copy of two forms of I.D.):

Employee Name: _____
Date of Hire: _____ Starting Pay: _____
Position: _____ Hours (full time or part time) _____

NEW ADDRESS OR PHONE NUMBER:

Employee Name: _____
New Address: _____
New Phone Number: _____

TERMINATION:

Employee Name: _____
Reason for Leaving: _____
Last Day Worked: _____

SALARY/WAGE ADVISORY:

Employee Name: _____
Effective Date of Salary/Wage Increase: _____
Present rate of pay: _____ Increase to: _____
Position (will employee's job classification change?) _____

STATUS CHANGE: (check one)

Part-time: _____ Full-time: _____ Casual: _____ Inactive: _____ Effective Date: _____

Client Signature

Date