

TRANSFER  SALARY CHANGE  PERSONAL CHANGE  REACTIVATE  SEPARATION  OTHER

**SCHOOL:**

**FIRST NAME:** \_\_\_\_\_ **LAST NAME:** \_\_\_\_\_ **MIDDLE NAME:** \_\_\_\_\_

**CHANGE PERSONAL -- PERSONAL DATA** **EFFECTIVE DATE:** \_\_\_\_\_

NEW NAME: \_\_\_\_\_ NEW HOME PHONE: \_\_\_\_\_

NEW ADDRESS: \_\_\_\_\_  
(STREET) (APT #) (CITY) (STATE) (ZIP CODE)

New Marital Status:  Married  Single New Taxes: Fed W/H \_\_\_\_\_ State/Local W/H \_\_\_\_\_ Cease Direct Deposit

Date of Marital Status Change: \_\_\_\_\_ Change Insurance Coverage to \_\_\_\_\_ Semi-monthly Contribution Amt \$ \_\_\_\_\_

**CHANGE -- SALARY/ POSITION/ STATUS** **EFFECTIVE DATE:** \_\_\_\_\_

REASON FOR ADJUSTMENT:  Transfer  Promotion  Merit Increase  Status Change  Stipend  Bonus

Other \_\_\_\_\_

**Transfer/Promotion/Merit Increase/Stipend/Bonus:**

Previous Job Title: \_\_\_\_\_ New Job Title: \_\_\_\_\_

Current (Old) Pay Rate: \$ \_\_\_\_\_ New Pay Rate: \$ \_\_\_\_\_ Increase (Decrease) Amount \$ \_\_\_\_\_

Reason (be specific and detailed): \_\_\_\_\_

**Status Change:**

Old Status:  FT Regular  PT Regular  TEMP Old Status:  Exempt  Non-Exempt (OT Eligible)

New Status:  FT Regular  PT Regular  TEMP New Status:  Exempt  Non-Exempt (OT Eligible)

**SEPARATION / LEAVE OF ABSENCE** **EFFECTIVE DATE:** \_\_\_\_\_

Separation Reason:  Voluntary Resignation  Resignation (i.e., job abandonment)  Involuntary

Other Reason \_\_\_\_\_

Last Day Worked: \_\_\_\_\_ Separation Effective Date: \_\_\_\_\_ Eligible for Rehire:  Yes  No

Reason (be specific and detailed): \_\_\_\_\_

Unused Earned Vacation to be paid upon Separation:  Yes  No Number of Hours Owed: \_\_\_\_\_

Leave of Absence (Please attach the employee's written request for a leave of absence and/or a doctor's note): \_\_\_\_\_

Start Date of Leave: \_\_\_\_\_ Reason for Leave: \_\_\_\_\_

Return from leave of absence Return Date: \_\_\_\_\_ (Attach a doctor's note if absence was for medical reasons)

**APPROVALS (in order of approval process)**

**SOM:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Principal/Dept. Head Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Finance & HR:** \_\_\_\_\_ **Date:** \_\_\_\_\_

HR/SOM/PAYROLL USE ONLY	OPERATIONS USE ONLY
<p>Request resignation letter                      Date: _____ By: _____</p> <p>Complete PAF and send to payroll      Date: _____ By: _____</p> <p>Contact employee to collect school items or confirm with SOM items have been collected.</p> <p><input type="checkbox"/> Roll Book    <input type="checkbox"/> Grade Book    <input type="checkbox"/> School keys</p> <p><input type="checkbox"/> Other</p> <p>Terminate email account                      Date: _____ By: _____</p> <p>Terminate in Paychex                      Date: _____ By: _____</p> <p>Terminate benefits                      Date: _____ By: _____</p> <p>Submit term to state/DOL                      Date: _____ By: _____</p> <p>Complete Exit Interview                      Date: _____ By: _____</p> <p>Personnel file to term cabinet                      Date: _____ By: _____</p> <p>Issue final paycheck (paper)                      Date: _____ By: _____</p>	<p>Terminate access in:</p> <p><input type="checkbox"/> JPAMS</p> <p><input type="checkbox"/> LEADS</p> <p><input type="checkbox"/> EGMS</p> <p><input type="checkbox"/> Building Access Code</p> <p>By: _____ Date: _____</p>