Payroll Status Form

Start Date: Employee ID #

Name:

Mailing Address:

Telephone: Date of Birth:

EMPLOYEE GROUP (NON-STUDENT)	EMPLOYEE SUB GROUP (NON-STUDENT)	PAY TYPE	STUDENT EMPLOYEES
☐ Administration	☐ Full Time	☐ Exempt (Salary)	☐ SEU
☐ Faculty	☐ Part time	☐ Non-exempt (Hourly)	☐ CWSP
☐ Staff	☐ Temporary	☐ Non-exempt (Salary)	☐ GA

	NEW HIRE	FROM:	TO:
JOB / TITLE			
-DEPT. NAME -DEPT CODE -OBJECT CODE			
SHIFT			
BASE SALARY			

REASON FOR CHANGE

☐ Rehired ☐ Transfer
☐ Promotion ☐ Layoff
☐ Resignation ☐ Merit Increase
☐ Involuntary Discharge ☐ Overload
☐ Annual Contract ☐ Graduated
☐ Contract Not Renewed ☐ Retirement
☐ Other: _____

EFFECTIVE DATE**:**

INFORMATION TECHNOLOGY FOR NEW HIRES & TRANSFERS

Telephone Extension**:** _____

Jenzabar Access: _____

Network/Folder Access: _____

EXPLANATION FOR CHANGE & OTHER INSTRUCTIONS

Authorized By:_____ Authorized By:_____
Department Head Date Dean Date

Authorized By:_____ Approved By:_____
Vice President Date Human Resources Director Date