



Payroll Change Notice

Date ____ / ____ / ____

Employee Name _____ Department _____ Title _____

E-Mail Address _____ Set-Up Company E-Mail Address

Check Appropriate Box:

- Add to payroll Change Withholding Rate (Complete new W-4 form)
- Change Rate Old Rate: _____ per _____ Change Status to:
 - Full-Time Part-Time Temporary
- Remove from Payroll New Rate: _____ per _____
 - Leave of Absence: Paid? Yes No
 - Return (Date of return to work) _____
- Change Title/Classification to: _____
- Transfer to: (Department) _____
- Address/Information Change _____

Date Effective: ____ / ____ / ____

New Hire Information

Address _____

Telephone # _____ Date of Birth (For Administrative use only) ____ / ____ / ____

Status:

- Full-Time Part-Time Full-Time Temporary Part-Time Temporary
- Exempt Non-Exempt Hourly Other _____

W-4 attached? Yes No I-9 attached? Yes No

Rate of Pay Salary: \$_____ or Hourly: _____

Voluntary Deductions:

Type of Deduction: _____ Standard Amount: \$_____

Change Voluntary Deductions:

Type of Deduction: _____ Change Amount from \$_____ to \$_____

Effective Date: ____ / ____ / ____

Reason for Payroll Change:

- Merit Increase See Performance Appraisal New Employee
- Promotion Other _____

Housing Allowance Breakdown:

Salary \$_____

Housing \$_____

Benefit \$_____

Reason for Termination:

- Voluntary Discharged Laid Off Other

Comments: _____

Employee Signature: _____ Date ____ / ____ / ____

Manager: _____ Title _____ Date ____ / ____ / ____